



# **INDIGESTION ITS CAUSE AND CURE**

**A Practical Guide to the Home-treatment of  
Stomach Troubles and other digestive disorders**

**L. RAMACHANDRA SARMA, M. Sc.**



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## PREFACE

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I am one of those who believe that it is not only possible but necessary for everyone to be his own doctor. This book is specially meant to be a guide in the self-treatment of digestive disorders.

The title of the book gives one the impression that its scope is limited to a very small range of disease conditions. But actually there is no such limitation, because the principle of unity forms the fundamental basis of Nature-Cure. Almost every chronic disease is dyspepsia of some degree. Real cure in any chronic disease is unthinkable so long as the root of the trouble, namely, dyspepsia, is ignored. Once digestion is set right and normal hunger is restored other superficial symptoms will go the way they came. This truth may seem incredible to those who are unacquainted with Nature-Cure; but the real proof lies in practical experience.

18th October, 1948 }  
Malad, Bombay.

L. RAMACHANDRA SARMA.

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## INTRODUCTION

It is by no means an exaggeration to say that almost all our ailments, possibly, with the exception of those which are due to accidental injuries, have their origin in the digestive system. A very large majority of the chronic or destructive constitutional diseases can be traced to these twin evils—indigestion and constipation.

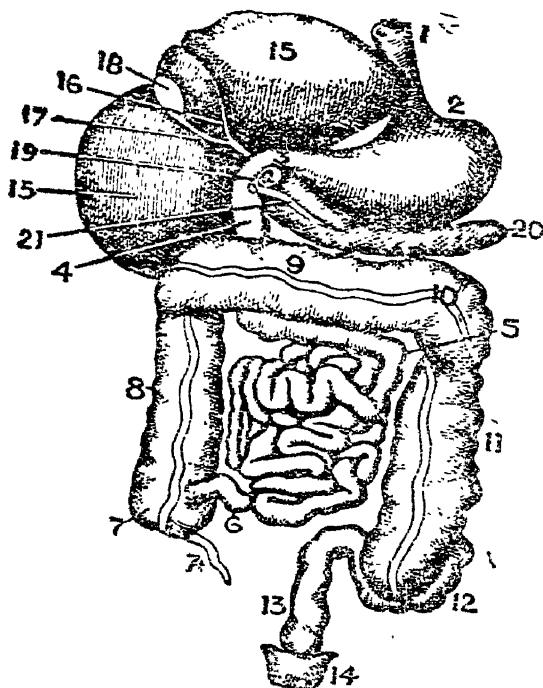
A time was when indigestion and disorders of the digestive system were the exclusive monopoly of the rich. But with the spread of urban civilization, with its debilitating habits and unnatural modes of living and eating, these troubles have become far more common than they were two or three decades back.

The fact that the drugging school, both of the west and the east has failed to give the sufferers anything more than a temporary relief from such troubles cannot be questioned. Patients nowadays rely more upon patent medicines than on the usual allopathic prescriptions. The position of the physician has now been usurped by the chemist and druggist

Said an honest allopathic physician to my father who was then suffering from dyspepsia of the worst type, "Dyspepsia is a disease of millionaires. If any doctor is lucky enough to tumble upon a sure remedy for this malady, he will very soon be the richest man in the world." The remedy has not yet been found, because there cannot be one in the very nature of things. Nevertheless unscrupulous men continue to make fabulous sums of money by holding out promises of cure with their quack remedies.



# DIGESTIVE ORGANS OF MAN



## DESCRIPTION OF DIAGRAM

1—Oesophagus or Gullet. 2—Cardiac end of the stomach. 3—Pyloric end of the stomach. 4—Duodenum. 5, 6—Convulsions of the small intestines. 7—Caecum. 7\*—Vermiform Appendage of Caecum, called "apendicula vermiformis." 8—Ascending Colon. 9, 10—Transverse Colon. 11—Descending Colon. 12—Sigmoid Colon the last curve of the colon before it terminates in the Rectum. 13—Rectum, the terminal part of the colon.

14—Anus, posterior opening of the alimentary canal, through which the excrements are expelled. 15, 15—Lobes of the Liver, raised and turned back. 16—Hepatic Duct, which carries the bile from the Liver to the Cystic and common bile Ducts. 17—Cystic Duct 18—Gall Bladder in which bile is stored 19—Common Bile Duct. 20—Pancreas, the gland which secretes the pancreatic juice. 21—Pancreatic Duct, entering the Duodenum with the Common Bile Duct.

## THE DIGESTIVE SYSTEM

The system of channels traversed by food from the time of its entry into the mouth, to the final stage of the excretion of the undigested part of it, is called the alimentary canal (aliment=food). The various parts of this canal which is about 30 feet long, and other organs involved in the digestive process are indicated in the diagram above :

The alimentary canal starts with the mouth. Then we come to oesophagus which leads into the stomach. The stomach is a large, pear-shaped muscular bag. This is the most dilated part of the digestive system and lies in the upper part of the abdomen just below the heart, from which it is separated by the diaphragm. Very often patients complain of heart disease when they are really suffering from an excess of wind in the stomach. The reason for this is the nearness of the two organs. The broad end (fundus) of the stomach lies to the left under the ribs, while the narrow end (pylorus) is at a lower level on the right side. The stomach ordinarily holds about 3 pints of food. In some persons it may hold as much as 5 pints and more. From this store house, the partly digested food is passed on little

by little to the small intestine through the duodenum. The passage of food from the stomach to the duodenum is controlled by a sphincter at the pyloric end.

The duodenum is about 10 inches in length and is of particular importance because it is into this part that the juices from the pancreas and the liver enter. The pancreas which is about 6 inches long and  $1\frac{1}{2}$  inch wide, lies just behind the lower edge of the stomach. The liver which is the largest glandular organ in the body, lies on the right side of the abdomen. Attached to the under surface of the liver is a small storage place for bile, the gall bladder. The bile contains a substance named cholesterol, which may sometimes be thrown out of solution and lead to formation of what are called Gallstones. When these stones obstruct the passage of bile from gall bladder, there will be intense bilial colic and jaundice may develop.

Then we come to the small intestine which is about 22 feet long. The portion of the large intestine where it is joined by the small intestine is called the caecum. There is a small tail-like appendage to the caecum, called the appendix, which, in the opinion of medical men, exists only to provide a means of income to the enterprising surgeon.

## THE PROCESS OF DIGESTION

Digestion starts in the mouth where the food is subjected to the chemical action of saliva and the physical action of mastication. Through thorough chewing the food gets divided up into finer particles facilitating the process of digestion. When saliva gets intimately mixed with the food, the starch in

the latter gets converted into sugar. Saliva is slightly alkaline and salivary digestion can take place only in an alkaline medium.

From the mouth the food goes to the stomach. Here again, it is subjected to the chemical action of the gastric juice secreted by the glands lining the inner walls of the stomach, and the physical action of churning brought about by the waves of contraction beginning high up in the body of the stomach and travelling towards the pyloric end (the narrower part of the stomach). In the stomach the salivary digestion, initiated in the mouth continues for some time till the hydrochloric acid in gastric juice permeates the food and brings it to an end.

Gastric juice contains, besides hydrochloric acid, two ferments or enzymes, pepsin and rennin and some micro-organisms. The digestive action of this juice is much more powerful and wider in its range. Pepsin digests protein, the necessary acidity for this chemical reaction being provided by hydrochloric acid. Rennin brings about the curdling of milk. [The commercial nennet used for preparing junket from milk is extracted from the stomach of a calf.] The micro-organism split up carbohydrates into gas and organic acids like lactic acid. The last mentioned action does not take place when there is too much acid.

The liquified and partly digested food is expelled in small quantities at a time from the stomach into the duodenum. Hence, if we eat in excess, it is the stomach alone which suffers. The trouble spreads to the duodenum and intestines only if there is persistent over-eating. This is indeed a blessing for which we should be thankful to Nature. If there is trouble due to overburdening

A chronic sufferer from indigestion is generally highly nervous, irritable and quarrelsome. He never has a good word to say about anything. Mentally, he may become depraved and he likes only foods which are highly spiced and fried. This factor makes his cure a bit difficult. He cannot reform his diet unless he regains his mental balance. But unless he gives up his appetising foods and takes to a natural diet, he cannot get control of his mind. It is advisable for such people to join a Nature-cure Sanatorium, and put themselves completely in the care of a competent Naturopath.

Most people may not know that the common cold from which few people escape, is really one of the milder symptoms of indigestion. It was Dr. Page who remarked that we catch cold in our stomachs. The tendency to catch cold is greater in winter because during that season an important eliminating organ, the skin, is comparatively inactive.

If some heaviness is felt in the stomach immediately after a meal, it means that the quantity of food has been too much. If the trouble is felt not only about an hour after a meal, it means that the meal has been too rich, (difficult to digest), or the foods might have been combined wrongly.

There are some symptoms of chronic indigestion which are mentioned as causes of indigestion by allopaths. It is deplorable that some Naturopaths also should get confused over this matter.

Thus Neurastheuia is an effect and not the cause of indigestion. The same is the case with hysteria and menstrual disorders in women.

## CAUSES OF INDIGESTION

The causes of indigestion are two-fold: wrong choice of foods and wrong ways of eating. The

former mistake may very often lead to the latter ; the two causes are therefore interlinked. It is very essential to examine all the causes thoroughly because without knowing and eradicating them completely, cure is unthinkable. We shall now deal with the first set of causes, namely, wrong choice of foods. It should be noted that the order in which the causes are mentioned, has little significance. The importance of each cause depends upon individual circumstances. ' It never rains but pours,' goes the proverb. Thus we are never guilty of one mistake ; we commit a host of them.

CAUSE (1) *Eating of indigestible or difficultly digestible foods :—*

Foods which are rich in protein and fat or oil are more difficult to digest than starch foods. Protein foods stay in the stomach twice as long as starch foods. Fats stay even longer. All pulses, nuts and animal foods are high-protein foods. Persistent use of such foods is bound to lead to indigestion.

Medical people will tell you that every adult should eat at least 100 grams of protein daily. I advise you not to pay any heed to them. For want of space I am not giving here my reasons for saying so. I shall deal with this question at length in another book of mine ' Food for Health.' I shall only state here that I have very sound reasons for saying that we do not need so much of protein as the allopath says we do. In the matter of food, if there is any one who is competent to give you advice, it is the Naturopath. Long before the allopath could convince himself that food may have some relationship with health and disease, the Naturopath had not only recognised this basic law, that wrong food is at the root of all *disease*, (Note: I am using

the singular.) but had actually built up a comprehensive system of dietetics both in health and in disease. Every honest and intelligent allopath admits this.

For getting cured of your digestive troubles you may have to reduce your daily intake of protein to 30 or even 20 grams. A healthy adult does not need more than 50 grams unless he is a hard-working labourer, in which case he will need 10 or 20 grams more.

Some foods which are easily digested, normally, may be difficult to digest owing to some personal idiosyncracies. For instance, the ripe banana is normally very easy to digest. But there are some people whose stomachs do not tolerate it.\* Dr. Milton Powel, a famous Naturopath of the west, writes that disregard of such idiosyncracies is a cause of indigestion. But he is putting the cart before the horse. These idiosyncracies are not present in healthy people. They are in fact a symptom of indigestion and not the cause thereof. But once they are developed, it is prudent to respect them so that the digestive trouble may not get worse.

But that does not mean that a person whose stomach does not tolerate the banana or any other food should go without it for the rest of his life. He should of course avoid it in the initial stages, but after some improvement is attained, he should try to accustom himself to that food little by little in the proper manner and thus train his stomach to tolerate it. If he proceeds step by step, this should not be difficult.

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\* Such idiosyncracies are very rare. Frequently it is found that there is no idiosyncrasy at all and that the refusal of the stomach to digest certain foods is due to the wrong manner of eating them.





2. Starchy foods shall not be mixed with sour or acid foods.

3. It is a safe rule to take only one concentrated food at a time. Healthy people may occasionally take upto two concentrated foods in the same meal. But persons with impaired digestive powers, shall on no account take more than one concentrated food at a time. Some patients may have to avoid concentrated foods altogether.

Non-concentrated foods can be mixed with one another or with any one concentrated food.

For the guidance of the reader, foods are classified below and some correct and wrong combinations are indicated :—

### CONCENTRATED FOODS

Nuts (Almonds, walnut, groundnut, etc.)	Fat and protein
Pulses (Black gram, green gram etc.)	Protein and Starch
Cereals (Wheat, rice, maize etc.)	... .. Starch
Flesh foods	... .. Fat and Protein
Dried fruits * (dates, raisins etc.)	... .. Sugar
Eggs	... .. Fat and Protein
Roots and tubers (Potato, yam etc.)†	... .. Starch

### NON-CONCENTRATED FOODS

Vegetables, leafy and others ; Fruits

Milk

### SOME CORRECT COMBINATIONS

Starch and vegetable

Protein and vegetable

\* Dried fruits contain sugar, but for the purpose of this classification they may be regarded as starch foods. They are concentrated foods but are easily digested. Hence they can be combined with other concentrated foods like nuts. A mixture of dried fruits and nuts is food for the Gods, as Dr. Alsaker would put it.

† In the uncooked state, grains are three times as concentrated as roots and tubers: But after cooking there is not much difference between the two in concentration.

Protein and fruit  
 Protein and Fat  
 Protein, fat and vegetable  
 Protein, fat and fruit  
 Milk and fruit  
 Milk and nut  
 Milk, fruit and nut.

### WRONG. COMBINATIONS

Starch and protein  
 Starch and acid fruit \*

CAUSE (3) *Lack of Vegetables* :—

Vegetables contain a good percentage of cellulose, or indigestible fibre. The fibre in vegetables is soft and plays a very useful role both in digestion of food and the elimination of waste. Foods which do not contain much cellulose (rice or wheat) form a sticky paste on cooking (like the one which book binders use). The digestive juices cannot penetrate into such sticky foods, and digestion consequently becomes difficult. †

But when they are mixed with vegetables, even rice and wheat which do not contain enough cellulose,

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\* All fruits which have a sour taste come under this class

† The role which cellulose plays in digestion is explained as follows by Sri K. Lakshmana Sarma—

"Cellulose is the coarse woody fibre which is present in foods, serving as the frame-work on which the other food factors are contained. This is not digested in the food-canal, but comes out in the stools; for this reason it was supposed to have no health-value whatever and that it is right to get rid of it or avoid it as far as possible. In fact it is this woody fibre which ensures the digestion of the digestible constituents; without it the food-substance would unite into compact pasty masses, which the digestive juices cannot penetrate sufficiently, even if there be enough of such juices, except perhaps in the very rare case of thorough insalivation and abstemiousness in eating; the particles of food in its natural state, from which the cellulose has not been removed, are held apart by cellulose, so that the digestive juices can penetrate the food through and through.

lose their sticky character and do not form a compact mass. Besides, cellulose gives bulk to the faeces and helps in their elimination.

Vegetables are non-concentrated foods, because they contain plenty of water.\* Hence they are easily digested. But grains are heavy foods. The man who eats only grains, excluding vegetables more or less completely, is likely to overburden his stomach, because people are accustomed to eat the same bulk of food, whether they eat vegetables or not.

#### CAUSE (4) *Denatured Foods*:—

Milling and polishing of grains have now become very common. In the case of rice, the bran and germ are removed by polishing, while in the case of wheat, the housewife removes with the help of a seive the coarser particles in the flour, which mostly consist of the bran and the germ. The bran and germ are important in three respects. Firstly they contain more vitamins and minerals than the inner core which we retain; secondly, the bran layer is said to contain some enzymes which can help to digest the inner core; thirdly they contain more cellulose than the inner core. The whole grain does not form such a sticky paste as the polished one on cooking.

Lack of vegetables and the other protective foods and the eating of denatured foods seriously affect all vital processes, including digestion. The necessary materials for body building will be lacking under such conditions. With the help of sham, impoverished foods like white flour, white sugar and vegetables which have been boiled and drained, we cannot build sound bodies. An organ which is

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\* There are starchy vegetables like the banana which are an exception.

kept working all the time cannot keep up its muscular vigour on such food materials. Not only is the vitality of the digestive organs lowered, but the digestive secretions are also vitiated in course of time.

#### CAUSE (5) *Fried Foods*:—

Frying of foods in oil destroys the vital constituents. Since the oil is strongly heated in this process, some oxidation products are formed which are poisonous. The oil itself is very difficult to digest. And what is worse, the oil forms a thin layer covering every particle of every morsel of food and prevents the digestive juices from having an access to the easily digestible part of the food also.

Vegetable or vanaspati ghee should on no account be used for cooking. It is much worse than vegetable oil.

#### CAUSE (6) *White Sugar*:—

White sugar is not food. The enormous increase in the consumption of this article is a curse of modern civilisation. It contains neither vitamins nor minerals and depletes the body of all its vitality.

Besides, sugar is a preservative. All perishable foods keep for a long time when they are soaked in syrup. Dr. Alsaker points out that this quality of sugar is likely to hinder the digestive process, because digestion is the opposite of preservation. In this respect also, the eating of sugar or of foods preserved in syrup is likely to lead to indigestion.

#### CAUSE (7) *Spices and Condiments*:—

Spices and condiments cater to our unnatural cravings. When our sense of taste is natural and not perverted, we not only find them unnecessary, but do not relish them. Devitalised foods which are insipid are made palatable by the use of spices.

Spices and condiments encourage indigestion by inducing overeating. They irritate the mucus membranes, make them secrete more juice, and in course of time deplete our resources. But, for the time being, they give us a false sense of increased digestive power; they make us misjudge our own digestive power. So we deceive ourselves and continue to overeat with serious consequences. All spices and condiments must be removed from the diet of a dyspeptic as a first step in the cure.

## CAUSES OF INDIGESTION

### (2)

In the last section, we saw some causes of indigestion which relate to wrong choice of foods. In this section, we shall deal with those which pertain to wrong modes of eating.

#### CAUSE (1) *Hungerless Eating*:—

This is perhaps the most potent cause of indigestion. There seems to be a good deal of confusion with regard to the nature of hunger. Hence it will be dealt with separately, in greater detail in a later section.

Hunger is preceded by an emptying of the stomach. The stomach is an elastic bag; its size is always equal to the volume of its contents. When all the food has left the stomach, it contracts and assumes a very small size. This contraction takes place in successive stages and at each stage a little of air imprisoned in the stomach is expelled. If the stomach is completely empty, the wind which comes out is absolutely odourless. But this is not the time for eating, but for drinking water. Hunger usually develops two to three hours after the escape of these clean winds.

Hunger may be defined as an indication of the readiness of the stomach to receive food, and to undertake the task of digestion. This feeling has nothing to do with giddiness, feeling of exhaustion, or a gnawing sensation in the stomach. Hunger is a cool, pleasant sensation. A hungry man does not feel tired; on the other hand, he feels a lightness in his limbs and has an inclination to work.

But hard and exhausting work will drive away hunger. Similarly, sudden shocks and emotional excitement, or mental anguish tend to drive away hunger. Food eaten at such times is not well digested.

Regularity in eating is not a rule of health. Even though it may be meal-time, hungerless eating is always bad. Postpone the meal till hunger is felt, or, better still, forego the meal completely and take only the next one, at the usual time. You may thus keep up your regularity in eating and at the same time, avoid hungerless eating.

#### CAUSE (2) *Eating too Fast* :--

"We have been provided with teeth, not for ornament, but for use." It is indeed a pity that few people realise this simple truth. Older people in our country eat much more leisurely than younger people do, and that would explain the enormous increase in digestive disorders in the present day. Hurried eating is especially common among the educated, who should know better.

Dr. Milton Powell writes that when he sees some people eating, he is reminded of a stoker with his shovel feeding a furnace with coal.

Moderation in eating is not possible when you eat hurriedly. Hasty eating and overeating always go together.

The mouth is a digestive organ. It digests part of the food and prepares the rest for digestion in the stomach and other parts of the digestive tract. The teeth and the tongue together divide the food into finer particles; saliva secreted in the mouth gets intimately mixed with the food and converts starch into sugar. There are no teeth in the stomach. Grinding of the food should be done by the teeth. To tax the stomach with work which it is not meant to do is a crime which is deservedly punished with digestive disorders.

Once the food leaves the mouth, we have absolutely no control over the process of digestion. It is always prudent to be careful where it is in our control. *Let us choose well and chew well.*

Foods which are dry compel chewing. But soft, watery foods have a tendency to slip in without being chewed. The diet of the rice eater is defective in this respect. The South Indian makes it worse by mixing buttermilk or rasam with rice.

Water is necessary, but it should be drunk at least an hour before the meal. The meal should be as dry as possible. This is especially so in the case of people who are habituated to 'rapid fire' lunches.

Many people are accustomed to washing down each mouthful with water or some other drink. This is a very bad habit. Food must be moistened not by water, but by saliva in the mouth.

Some people may not like dry food. This is because their mouths are dry, there is not enough saliva. If their mouths are dry it is an indication that they are not hungry. They must wait till they get hungry. Or the dryness may be due to thirst. Let them sip water slowly and wait for some time; the mouth will then begin to water.

Liquid foods like milk or fruit juice must be *eaten* and not drunk. That is, they must be treated as solid food and taken in slowly, so that insalivation may be complete.

It was Fletcher who first drew the attention of the west to the need for mastication. Simply by adhering to the rule of eating slowly, he not only regained his lost health, but established world records in endurance tests. But he did not live to a ripe old age, partly because he wasted his vitality in exhausting physical exercise and mainly because though he chewed his foods well, he chose them ill. However, his example has clearly demonstrated that slow eating and abstemiousness will alone go a long way in setting right many obstinate digestive disorders.

### CAUSE (3) *Eating too much:—*

Overeating is bound to lead to indigestion. Suppose you eat twice the quantity of food which your stomach can tolerate, it will not be digested in double the normal time even.

The stomach is an elastic bag, but there is a limit to its elasticity. When it is filled to its maximum capacity, it cannot contract and expand and do the churning. This can be easily understood if you try to gargle with your mouth filled completely with water. You cannot, unless you spit out a little of the water. That is why you get acid risings in the throat after a very heavy meal. The stomach is trying to get rid of part of its load. Under such circumstances, the best course is to vomit.

Food is perishable. It retains its perishable character up to the time it is assimilated and becomes part of the body substance. If food stays longer than normal in the digestive tract, it will deteriorate; starches will ferment, proteins will



putrefy, toxins will be formed, poisonous gases will be generated. The most potent cause of disease is formation of poisons in the digestive tract and their absorption into the blood.

Habitual overeating will lead to a dilation of the stomach. If the foods are also prone to ferment or putrefy, the gases will lead to still further distention of the walls of the stomach. A distended stomach does not retain its original elasticity and tone and hence it becomes weak and loses much of its efficiency.

Overloading of the stomach may even lead to sagging or even its displacement from its normal position. Such structural defects, apart from worsening the digestion, will have other more serious repercussions. Dr. Lindlahr has shown that sagging of the stomach may lead to prolapse of the uterus in the case of women. Displacements of the uterus are invariably due to pressure occasioned by sagging or displacement of digestive organs.

Though it is easy to explain the dangers of overeating, it is not so easy to say what constitutes overeating. One cannot exactly say where the line should be drawn between abstemiousness and indulgence. I shall give some practical hints which are applicable to healthy people; but each person must be his own guide:

1. When the stomach is empty of food (it will contain some air) it is in a contracted state. As food enters it, it slowly expands and provides more room inside. This expansion goes on till no strain is felt, but when there is even a slight strain, the stomach instead of expanding further expells some of the air which is imprisoned therein and thus makes room for more food. This wind carries the smell of the food. To this wind the author

of the Practical Nature-Cure gives the name, *Stomach's Veto*. It is now that we should stop. This veto may be missed once or twice, especially when you eat rapidly, but when it does come, we can form an idea of the quantity which we can take safely and bear it in mind even when the veto does not come. If this limit is passed, there will be a series of such winds, but it is the first one which we should take note of.

2. Much of our overeating is due to our having too many dishes in the same meal. Each dish constitutes one course or one meal, so much so that the plural 'meals' is much more appropriate than the singular 'meal'. The sense of taste and also our appetite gets dull when we have had enough of one course of food. But we do not stop there, but turn our attention to the next course. At the sight of the new course, which tastes differently from the first one, the senses and appetite are revived once again, so that we make a full meal of that course also. If we are having rotis and vegetables, we should stop with that and not go in for a second course of rice and vegetables. If we do want to take both, let us have them as separate meals. The South Indian who takes rice alone is also a very bad sinner in this respect. He starts with rice and dal or rice and sambar, then goes in for rice and rasam, then again rice and curd or buttermilk. These are regular items in his menu. On festive occasions there will be more. If we restrict ourselves to one course of food in each meal (rotis and vegetables constitute one course), the quantity of food will automatically get adjusted.

3. Overeating is relative to the quality of food. A pound of rice or wheat may, for an individual, constitute overeating, but two pounds of vegetables or fruits may not. This is because while the former

is concentrated food, the latter is four-fifths (or even more) water. Again, a pound of gram or nuts may constitute overeating, while the same quantity of wheat, rice or maize may not. This is because, grams or nuts are richer than cereals—richer in the sense that they contain more of protein or fat or both; proteins and fats are difficult to digest.

4. Overeating will lead to a feeling of discomfort in the stomach. This feeling may rise immediately after the meal and disappear after about an hour, or it may rise immediately after the meal and continue for some hours, or it may rise only about an hour after the meal and continue for a long time. In the first case only an adjustment of the bulk of the meal is needed. The second case needs an adjustment of the bulk, quality and combination of foods. The third case needs a setting right of the quality and combination of foods.

Just a word here about expectant mothers. The popular motion is that they need to eat for two, or at least that they should eat much more than others. That is a mistaken idea. Actually, only a very small fraction of what she eats goes to nourish the baby. She does not need more food, but better food. In fact, it is during this period that she should take greater care of her digestion. The womb is situated between the urinary bladder and the rectum, and any stagnation in the bowels will cause an undue pressure in the womb. The child in the womb is a sacred trust and it is an unpardonable crime to spoil the chances of that innocent babe by over-indulgence in eating at this period. Most people think that a baby which is plump at the time of birth is the normal one. Animals living free in Nature give birth to young ones which are almost skin and bone.

### CAUSE (+) *Number of Meals*:—

There is a proverb current in our country, which says, 'He who eats once a day is a yogi, he who eats twice a day is a bhogi (one who is after pleasure) and he who eats thrice a day is a rogi (sick man).' This statement is true to the letter.

When we are eating three or more than three meals a day, the digestive organs are not afforded any rest at any time in the day. Before the stomach can finish with one meal, it has to get ready to digest the second. The difficulty is worsened by the fact that people who eat three times in the day pass stools only once in the day. This leads to stagnation and this stagnation both directly and indirectly restricts the free passage of food through the digestive tract. A vicious circle is thus set up.

A person who eats only twice in the day cannot give sufficient rest to all his digestive organs at the same time, but he can give rest to each one of them in turn. Thus when the food is in the stomach the intestines may be resting and vice versa.

The best plan for fully grown adults is to eat only twice in the day, once in the forenoon and a second time in the evening or night; of the two meals one should be a light one. Old people can keep fit only if they are content to live on only one substantial meal in the day; apart from that they may just have a drink. In this case, for a few hours every day, the whole digestive canal will remain empty. For children two substantial meals and one very light one should be sufficient. For boys and girls one substantial meal and two light ones should be the rule.

### CAUSE (5) *Snacks between meals*:—

Women are perhaps the worst offenders in this respect. I do not object to the taking of sweets

occasionally, but such sweets or savouries should, properly speaking, form part of the meal. People take milk as a sort of a drink in the morning or evening or before going to bed. This is also bad. Milk is good nourishing food, and not a drink. It should be regarded as a light meal or made part of a meal. Those who regard milk as a drink are not treating it with the respect which is due to it. Naturally, it turns against them and has its revenge.

#### CAUSE (6) *Work after food:—*

Any kind of work interferes with digestion to some extent. If the work is a hard one, digestion is completely upset. This is especially so if the work commences within about half an hour after a meal. I have found that in the case of those whose digestive power is not up to the mark, half an hour's strenuous work (particularly when it involves brisk walking or running) immediately after a meal, is not compensated for even by six hours' rest afterwards.

Eating must always be followed by rest, but our hours of work either in offices or schools are quite unsuited to our habits of eating. We take our food hurriedly at about 9 or 10 a.m. and rush to our place of work. Unlike the westerner who takes his heaviest meal at night, we take our principal meal before going to work. Either we should change our habits of eating or get our hours of work altered. The latter is perhaps the more feasible proposition.

Our ancient scriptures say, "Do your work with water alone." The Bible says: "Woe unto thee, oh land, when thy king is a child and thy princes eat in the morning." Celsus, the famous physician of Rome laid down the golden rule, 'Let them study not after food but after digestion.' In our own times Dr. Jules Virey proved, by his experiment on dogs

that digestion is arrested more or less completely by work. Hunting dogs are said to know this truth so well that they always avoid eating before going for a hunt. Strange that most people are not aware of this simple truth and are often reluctant to change their habits even when they are taught the correct way.

*Other Causes :—*

Any habit which reduces our vitality and weakens our Life will also lead to indigestion, because it is Life which digests. All stimulants like coffee, tea, alcohol etc. are a tax on our vitality. There is of course an energetic feeling after we take coffee. But this increased energy has not been obtained from these drinks. As is explained in Practical Nature-Cure, the brain is entrusted with the task of regulating the flow of vital power; coffee, tea or alcohol poisons the brain and thus makes the regulating mechanism inoperative. Hence vital energy flows along the nerves uncontrolled, and we get a feeling of increased energy. But the ultimate effect is a depletion of our vitality. Dyspeptics who want a cure must first give up these debilitating drinks. They are as bad as drugs.

Non-observance of Brahmacharya in younger years and excessive indulgence in later years may often be the cause of chronic indigestion. I know some young men who, due to sexual abuses, became chronic dyspeptics before they were 20. When such abuses exceed a limit,—it is difficult to limit oneself in these things once one gives way to temptation—the vitality of the patient gets so much reduced that even Nature-Cure may not avail to save him. For it is Life which cures and Nature-Cure only provides the conditions necessary for enabling Life to do its work of healing.

A consultant wrote that his case was diagnosed as dyspepsia due to an excited condition of the nerves. In order to strengthen his nerves, he was being given injections of vitamin B. I wrote to him that the excited state of his nerves was not the cause but a symptom or effect of dyspepsia, that he must get cured of his digestive trouble first and that his nervous trouble will vanish automatically.

### SOME MISCONCEPTIONS

I wish to remove some misconceptions of the relation of food and Life which, thanks to the influence of medical teachings on the subject of nutrition, have rooted themselves in the minds of the educated.

Nutrition experts of the allopathic school always lay the emphasis on abundance. But the Naturopath\* stresses the need for economy.

To bring out the marked contrast between the allopathic and Naturopathic approach to the subject of nutrition, I shall cite some examples.

Chittenden demonstrated experimentally that about 40 to 50 grams of protein a day is quite sufficient for the maintenance of their full vigour and fitness even for athletes. (Many of the athletes even excelled their old records when they were on this low-protein ration.) We Naturopaths accept Chittenden's conclusions as being consistent with our principle of economy. The allopath on the other hand, while he admits the genuineness of Chittenden's experiments, recommends the taking

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\* Strictly speaking, I should say Naturopath of the Lakshman School; for the principle of Vital Economy, which was just hinted at by pioneers of the west like Dr. Dewey, was fully developed for the first time by Sri K. Lakshmana Sarma. The central idea of his system of Nature-Cure, as explained in his Practical Nature-Cure, is Vital Economy.

of nearly three times the Chittenden ration of protein on the plea, that we shall be on the 'safe side' when we have everything in abundance. It is not the safeside, but the danger side, because protein is a putrefyable food.

To be on the safe side, says the allopath, we should have an abundance of food—much more than what we actually need. To be on the safe side, says the Naturopath, we must not eat more than what we really need or what we can assimilate.

When a patient is suffering from fever, the Naturopath wants to conserve Life and refuses to tax the patient with the work of digestion; he puts him on a complete fast. On the other hand, the allopathic text books, under the same circumstances, recommend feeding the patient with nourishing food in order to sustain life\*. While the Naturopath tries to conserve Life by abstaining from food, the allopath tries to sustain Life by taking in food.

Why should there be this radical difference in method between these two systems of treatment? The reason, as I said already, lies in the radical difference in their conceptions of life.

\* Dubois in his 'Basal Metabolism' recommends liberal feeding of fever patients. He admits that patients under such conditions, are generally unwilling to take food, but insists on coaxing or even forcing them to eat. An intelligent nurse, he writes, should not find it difficult to cajole the patient and make him eat. According to this author, feeding is necessary to keep up the nitrogen balance, for which purpose the patient may have to eat even more than people normally do.

But many sensible allopaths, when they find that the Nature-Cure method of putting the patient on a fast works better in practice, set aside the teaching of their text books and put their fever patients, not exactly on a fast, but on a diet which is an approach to a fast.



The allopath denies Life, or at least, the way in which he treats his patients amounts to a denial of Life. To him there is nothing beyond the material, the gross. He conceives of Life as an effect of an interplay of chemical processes. The source of Life, he says, is the energy derived from the combustion of food.

To the allopath, the body is just a machine. But he fails to understand that a machine should have an operator. That operator is Life.

The allopath believes that Life is sustained by food, so for ensuring an abundance of Life, or vitatity, he recommends an abundance of food.

But the Naturopath believes in Life as something beyond the material. It is Life which assimilates food, releases the energy stored therein and makes it available for work. Life makes use of food, but Life is not sustained by food.

When we eat in excess of our need, we may or may not gain in weight, but we are by no means adding to our vitality; we are only depleting it.

Vitality is something which requires to be conserved, economised. One of the ways of economising our vitality is to be economic in eating. That in essence is Vital Economy.

Food is building material; it is also the source of muscular energy. But it is not the source of Life. Life is the subtle power which builds up the living body according to a definite pattern and maintains it in working order. It is Life which makes that microscopically minute particle grow into a complicated living body with innumerable parts, an exact copy of its parent. It is Life which separates it from

its parent and starts it as an independent being. It is Life which differentiates the original substance into a great variety of tissues and organs, and guides their diverse activities so as to serve one common purpose. It is Life which is behind all the workings of the body, both in health and disease.

We should therefore speak of conserving Life, not of sustaining it.

Space does not permit me to elaborate this point further.

A second misconception is with regard to our food requirement. Food requirement is usually given in terms of Calories. According to the allopathically-inclined scientist, even a person who is resting in bed needs to consume about 2000 Calories daily, which is equivalent to about 20 oz. of grains.

A dyspeptic who wants to act up to this teaching of medical science has no hope of cure because he cannot digest even a third of the quantity of food, which, the allopaths say, is absolutely essential for sustaining Life. Herein lies the secret of the failure of allopaths to cure dyspepsia.

But hundreds of dyspeptics are annually being cured by natural methods. My father himself suffered from the worst type of this malady. In my father's case, so long as he religiously adhered to the allopathic dictum, which prescribed 2500 Calories of food for a man of his type, he found that he was getting worse day by day, even when he was relying on predigested food. He drastically cut down his rations to a very small fraction of the allopathic minimum. At one time he lived for six months on

one cup of milk and two bananas taken twice in the day. During the past thirty years, his daily intake of food has rarely exceeded 1,000 Calories. For months together he has lived on 600 Calories and less even. Once he went on a fast for 35 days at a stretch; there have been many other fasts of shorter duration. He refused to be bullied into obeying the dictates of the allopath, and thanks to that, he is still LIVING, free from the troubles which clung to him tenaciously till then. But his getting freed from disease was a small thing compared to the enormous work he has turned out after that.

This is just a typical example. Every dyspeptic who was treated naturally has followed a similar course, and has had the reward which the observance of such a course entitles him to.

Whether the fundamental basis of the Calorie theory is correct is a different question. But the food requirement calculated on the basis of the Calorie theory is unreliable, to put it mildly.

Our Calorie requirement for mere sustenance, is very low, so low that we need never worry about a Calorie deficiency.

Nature-Cure never cares for Calories, but it advises its patients to be careful not to exceed their capacity to digest, never to eat more than what their vital power can cope with. If they are desirous of getting back their lost health they must eat even less than what they can assimilate, so that enough vitality will be left over to do the work of repairing the body and restoring health.

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## HARMFUL REMEDIES

Digestive troubles have opened up a lucrative channel of trade to doctors, druggists and manufacturing chemists. There are three classes of remedies which find general application—sedatives, tonics and alkaline mixtures. These drugs are, one and all, harmful. They may give a temporary relief, but in the long run they tend to worsen the disease and make it incurable, because they give rise to the very causes which brought about the trouble.

### SEDATIVES

Opium, bismuth, oxalate of cerium etc., which are the sedatives in common use, have an immediate effect of dulling the pain. But this sedative action is due to their stupefying the nerves of sensation. These dope-drugs do not do us an atom of good. On the contrary, their frequent use deadens and destroys the natural vitality of the stomach muscles and nerves and corrupts the digestive juices.

### TONICS

The second class of drugs, the tonics are generally employed after the sedatives or dope-drugs have lost their power to lessen the pain, even temporarily. Such tonics which contain deadly poisons like arsenic and strychnine are meant for whipping up the flagging energies of a tired and overworked stomach. To call it an utter folly is to put it too mildly. "You would never dream of administering deadly poisons like arsenic or strychnine to a perfectly healthy, strong man; yet when a sufferer can barely crawl about and is suffering all the weakening effects of prolonged failure to digest and assimilate food, that is the time when the

allopathic doctor chooses to introduce these deadly drugs into the poor, ill-used stomach!" (Milton Powell). These tonics may or may not have a temporary stimulating action. But let not anybody imagine that this increase in vitality is obtained from the drugs. What happens is that the patient's reserve of vitality is quickly exhausted. No wonder that this spendthrift policy of drawing from the capital ultimately makes the patient, vitally, a bankrupt.

## ALKALINE MIXTURES

The most widely used among the remedies for digestive disorders are perhaps the alkaline mixtures containing alkalis like bicarbonate of soda, magnesia etc. An indication of the enormous quantity of such powders consumed by sufferers who are desperate after some remedy, can be had from a report in the *British Medical Journal*, quoted by J.C. Thomson in his '*Two Health Problems*."

"As a sidelight on the prevalence of dyspepsia in the services—and among the civil population from whom they are recruited—I had a conversation some time ago with a member of a firm of retail chemists, who own about a dozen shops in an industrial area. He asked me to guess the amount of alkaline powder sold by his firm each month. In putting the figure at a couple of hundred weights I imagined I should be well outside the mark. To my surprise, he said that the amount averaged about half a ton per month. (H. M. Stanley—Turner, B. M. J., 19—4—'41)."

Where excessive acidity is one of the attendant symptoms of the digestive disorder, these alkaline mixtures do give an apparent sense of relief at first. To the short-sighted medico it may appear to be

easier to pour alkalis down the throat instead of searching out the primary cause of the acidity and eradicating it. But the final effect of introducing artificial alkalis into the human stomach, is, as Kellog has shown to encourage the secretion of more acid to overcome the artificially induced acidity.

## THE BLAND DIET

It is not true to say that the allopath has not paid any attention to diet. He does advise some dietetic modifications to the dyspeptic patient, but the sort of diet which he recommends only tends to make the condition worse.

Medical science has its roots in a mechanistic concept of life; medical practice consists in the treatment of isolated symptoms. So the fault of prescribing the wrong diet lies not on the individual medical man but on the system itself.

The walls of an overworked stomach will naturally be sore and inflamed. The medical man feels that such sores should be soothed by the eating of soft pasty foods, mixed with plenty of ghee. A bland but highly nourishing diet is the usual prescription for a dyspeptic.

The only thing that an average allopath knows of dietetics is a crude idea of how much a man of a certain age, height, weight and occupation should consume. So when he speaks of a nourishing diet he does not refer to something health-giving but only thinks of the quantity of starch, protein and fat which will be available in that diet. He thinks in terms of Calories to give life, and of protein and fat to enable the patient to put on weight. But he ignores the Inner Eater (Life) who assimilates the food.

So the only consideration which an allopath has in choosing what he thinks to be the right type of foods for the dyspeptic is only this. The dyspeptic is weak and hence he should have enough calories to make him energetic; he should have enough protein and fat to enable him to put on flesh. So the foods which he chooses are, rice, wheat, pulses, meat, milk, eggs, sugar, ghee, etc.

The allopath, as was pointed out already, only treats isolated symptoms. Hence he advises that foods meant for dyspeptics should be soft and slippery so that they will not irritate the walls of the stomach by friction. Wheat flour is carefully sifted in a sieve and the coarser particles\* which contain a high proportion of vitamins and minerals, are removed and only the fine flour or maida, which being deficient in the essential elements, is disease-causing, is prescribed. Similarly rice is polished well in order to remove the bran and germ. Indigenous doctors recommend 'Punaf-pakam' in cooking rice. That is rice is cooked once, the excess of liquid is decanted off, more water is added, the once-cooked rice, is cooked a second time and the excess of liquid is again decanted. This rice is mixed with plenty of dal, and ghee, and this dish† along with milk constitutes the highly nourishing, bland diet commonly recommended to the dyspeptic in the south. Little thought is paid to the fact that the digestive trouble itself was the consequence of eating such devitalised foods. Rice, cooked in this fashion, contains only

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\* The coarser particles are bran and germ. These contain a high proportion of protein and are much tougher than the inner core of the grain which is mainly starch. Because of their toughness, the bran and germ remain as coarse particles after milling.

† This South Indian dish is the same as the Kichdi of north India.

starch. It is the sort of stuff which is only fit to be used as glue by a book binder. It will clog the bowels and constipation will be the result, thus paving the way for other chronic diseases. No wonder that in all cases of dyspepsia the allopath fails miserably. In the beginning the stomach will overwork itself to digest such indigestible combinations of foods.\* But later, a stage will be reached when the tired digestive organs will cease to take the trouble of digesting such stuff and the food will pass along, either partly digested or undigested. Diarrhoea will then be the result.

Another queer medical notion is that the stomach should never be allowed to remain empty whenever its walls are inflamed. One writer says that the inflamed edges of the wound may come into contact with another part of the stomach and give rise to more pain. It is a fact that in many cases where suffering is due to the presence of irritating fluids in the stomach, the pain is slightly lessened for some time when some food is eaten. The lessening of the pain is probably due to the irritating liquids getting diluted. But eating at this stage will lead to the formation of more of such irritating liquids and the pain will become more intense after a short time. The right course in such cases is to induce vomiting to bring out the irritating liquids, and to give rest to the stomach for a minimum period of 12 hours. Other soothing measures to be adopted when there is acute distress will be dealt with in a later section.

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\* A pasty mixture of rice and dal is by itself difficult to digest. When ghee also is added in plenty, every particle of rice and dal gets covered with a filament of ghee and thus the digestive juices are prevented from having direct access to the particles of grain.



## SURGERY

As a result of medical bungling an ordinary indisposition of the digestive apparatus, often results in a more serious trouble. The trouble generally starts with inflammation of the stomach or duodenum. The inflammations develop into ulcers, and when conditions become worse still, perforation might take place.

It is generally supposed among the allopaths and their very large following that surgery is the only hope in cases of gastric or duodenal ulcers. But it is hardly understood that the resort to surgery is itself an admission of the failure of allopathy to cure the trouble in its initial stages.

Excepting in very rare cases (which would be rarer still but for medical bungling) surgery is an unwarranted interference with Nature and it generally results in a permanent injury to the patient. Just a few days prior to the writing of these pages the writer met an unfortunate invalid who had a tragic story to tell of the cruel role played by doctors and surgeons in his life. Dyspepsia was at the root of all his troubles. But the doctors, as usual tried to pick out some particular organ and put the whole blame on that. When the doctors had failed, the surgeon came in. He cut open the patient's abdomen and made a careful examination; there was nothing wrong particularly. However the surgeon removed the appendix, the idea being that some organ must be removed once the abdomen had been cut open. "I cannot find out what is exactly wrong with you; any how as a matter of trial, I have cut out the appendix. Let us hope that you will improve." Unfortunately, the patient got worse, and returned to the surgeon after

a short time. Again his abdomen was cut open and this time, his gall bladder was removed, of course just to make a trial. This second operation made the patient worse still. The surgeon then passed him on to a dentist who declared that his teeth had decayed and they formed the septic focus poisoning the blood. Accordingly all the teeth were pulled out. Then followed some minor operations. When they had failed to give him any relief, the medical men coolly told our patient that there was nothing wrong with him really. The trouble was all in his imagination. They explained it off with the help of a high sounding name neurasthenia. He had only to think that he was well, the doctors told him, and all could be well. This patient has now come to Nature-Cure, having got fully disillusioned about doctors and drugs. It now remains to see, with what is left of his anatomy, how far Nature-Cure will be able to help this wreck of a human being. Though surgery is the only method which has the full support of all orthodox practitioners, Nature-Cure practice in the past few decades has proved beyond question that such troubles do not require an operation, but rather a thorough reform of the patient's mode of life. "With the passing of time," Russel Sneddon writes, "the success of the latter treatment has been tested proved and recognised, and to-day ulceration is commonly regarded as a case for the dietician and physician and not the surgeon, and medicinal and dietary treatment take the place of the knife."



What a bewildering variety of symptoms! But these are not all, by any means. However, this is more than sufficient to confuse anybody if he begins to think that each one of these symptoms is a separate disease, needing a separate treatment.

### The Nature Cure Principle of Oneness of Disease

There is only one disease, because there is only one cause of disease, and there is therefore only one way of treatment which is the eradication of that one cause.

If you want a proof of this statement, you question yourself. You go through your past life carefully, and you will find that whatever you suffer from is only the result of your own mistakes in the past. As I said in the beginning, nobody suffers from disease, who does not deserve it. The life history of every sufferer should alone be sufficient proof to show that neglect of Nature's Law is at the root of all disease.

Perhaps you are not satisfied with this simple explanation. Perhaps you are one of those who will be satisfied only by so-called laboratory experiments. The experience of hundreds of thousands of men and women may not appeal to you as a convincing proof. If experiments with rats, mice and guinea pigs will alone satisfy you, I shall recount some of that type.

Sir Robert McCarrison conducted some experiments in Coonoor, which have since become famous. But there is one aspect of his results which have not been given the publicity it deserves. From our point of view that is the most important outcome of his researches.

Sir Robert McCarrison had a big colony of rats, which he divided into different groups. They were all put in identical cages, kept under identical conditions. The degree of cleanliness achieved was indeed remarkable; in a room where 1189 rats were housed, there was not a trace of bad odour. But the food of the different groups of rats was different. One set was getting just the right type of food—chapatis made of wholemeal wheat flour and lightly smeared with fresh butter, sprouted pulse, fresh, raw carrots and raw cabbage in unlimited quantities, unboiled whole milk, a small ration of meat with bones once a week, and an abundance of water both for drinking and washing. The other groups of rats were fed on diets of ordinary civilised people. The result was remarkable. The first set of rats were specimens of perfect health, strength and endurance; disease was entirely abolished. But in the other sets, it seemed as though the lid of a veritable Pandora's box had been opened. The long list of diseases which they suffered from is simply staggering. As Dr. G. T. Wrench puts it, as many diseases as could be packed into the small body of a rat were present. There was not a single organ or part of the body which was unaffected.

This should give one food for thought. The only difference between the first set and other sets of rats lay in their diets. If one set developed into specimens of perfect health, while others were quite the reverse of it, there can be but one cause—wrong food. There were so many disease conditions,—the list will run to a page and a half—involving the eyes, ears, nose, lungs, heart, stomach, intestines, liver, kidneys, bladder, reproductive organs, blood, ordinary glands, special glands, and nerves. (The brain was not examined) All these disease conditions which allopathy regards as independent

diseases with separate causes and requiring separate treatments, all of them in this case were the result of one cause—WRONG FOOD.

As an illustration of the allopath's utter disregard of the real cause of disease Dr. G. T. Wrench has chosen at random three of the disease conditions mentioned in that list—Pneumonia, Peptic ulcer and Acute Infection of the middle ear. Under each disease, on the left hand side are given the causes of that disease according to medical text books and on the right hand side the cause of the same according to the Coonoor experiment. The comparison is very interesting indeed.

#### CAUSES OF PNEUMONIA

##### Text Books

##### Coonoor

Pneumococcus Microbe

Weakness of old age

Exhaustion

Chill

Previous Attack

**Wrong Food**

Some other illness

A Blow on the Chest

#### CAUSES of PEPTIC ULCER.

##### Text Books

##### Coonoor

Occupation : anaemic and  
dyspeptic servant girls,  
shoemakers, surgeons.

**Wrong Food**

Injury

Associated diseases such as  
anaemia, heart disease,  
diseases of liver,  
appendix, gall bladder,  
teeth, tonsils.

CAUSES OF PEPTIC ULSER (*Continued*)

Text Books	Coonoor
Nervous strain	
Disturbance of the circulation	<b>Wrong Food</b>
Large superficial burns	
Certain families are said to be more liable.	
Increased acidity of the stomach	
Several of the above in combination	

## ACUTE INFECTION IN THE MIDDLE EAR

Text Books	Coonoor
External atmospheric conditions	
Cold in the head	
Infectious diseases, such as measles, pneumonia, and influenza	<b>Wrong Food</b>
Sea baths	
Nasal douches	
Comment is needless	

The evidence given above is overwhelming. But after all, the proof of the pudding is in the eating. Nature Cure recognises wrong living as the only cause of disease and right living as the only remedy, and this mode of approach alone has been found to be successful in practice

Indeed the record of Nature Cure in the treatment of disease conditions affecting the stomach and intestines is remarkably bright, and it is no secret that it is in the treatment of these disease conditions that allopaths grievously fail.

## THE THREE STAGES

Disease is one and the principle underlying the treatment is also one. But the exact mode of application of the principle will depend upon individual circumstances. For facilitating the understanding of the treatment, I shall divide all digestive disorders into three categories or stages. The first one marks the first stage in the progress of the disease, that is, the beginnings of indigestion, when the foundation is laid for the onset of indigestion. The second is the acute stage, and the third the chronic. In the third one I shall make a sub-division—an acute phase with a chronic background and the genuine chronic stage. Here it will be possible only to indicate how to distinguish between the three stages of disease. For a fuller understanding of the Nature-Cure conception of disease, its beginning and progress, the reader should go through my father's Practical Nature-Cure.\*

## THE BEGINNINGS OF INDIGESTION

Indigestion is generally associated with pain or a sense of acute discomfort in the upper abdomen. As a result, people do not think that they have indigestion unless there is some pain. But often, in the early stages, pain or discomfort may not be marked. In fact, generally, a feeling of pain is an indication that digestion has been out of order for some time. This is because pain in the stomach is felt in a rather indirect or complicated way. So in most cases pain starts only after indigestion has

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\* Practical Nature-Cure, by Sri. K Lakshmana sarma,  
Published by The Nature-Cure Publishing House, Pudukkottai,  
(Trichinopoly) South India.



persisted for some time, which may be from few days to a few weeks.†

In the early stages, indigestion may manifest itself only as a sense of heaviness or fullness of the stomach or a sort of uneasy feeling. Real hunger will be absent, though there may be a craving for highly spiced or appetising foods. Inclination to activity will be lacking. If treatment is begun at this early stage, cure will be only a matter of a day or two. Often, missing the next meal will be sufficient.

**TREATMENT :** Fasting for a day or two, as might be necessary, is the best remedy. Break the fast with a glass of fruit juice or vegetable soup. Apply a cooling abdominal wet bandage (to be described later) in the afternoon or whenever there is discomfort and keep it on for about three hours, or as long as it is pleasant to keep it on. A spinal bath with a cold trunk pack may be taken when the day is warm. Some people who are unaccustomed to a fast may feel giddy during that time.

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† That the stomach and intestines are insensitive to ordinary irritation, may be illustrated by a familiar example: When something pungent (Chillies for example) is swallowed, the irritation is felt only in the mouth, throat and the anus (at the time of passing stools), that is, in the beginning and end of the alimentary canal. Surprisingly enough, the irritation is absent in the middle region, comprising the stomach and intestines. The reason is that the middle and end parts of the alimentary canal are controlled by nerves which are connected with the spinal nervous system and the brain, whereas the stomach and intestines are controlled by the sympathetic nervous system which is not connected with the brain. Pungent articles do irritate the mucus membranes of the stomach and intestines, but the irritation is not conveyed to the brain and therefore not felt by us. But when the irritation is too frequent, the tension of the walls of the stomach may be disturbed, leading in turn to a disturbance in the internal pressure. It is only in such cases that pain is

They should not imagine that they are hungry and rush to take some food. In a few cases the trouble may be largely an imaginary one. But generally, the development of a feeling of giddiness during a one-day fast is an indication that the person concerned is not quite healthy, that there is much of accumulated filth in him which needs to be eliminated. To be able to fast for a day or two without losing one's energy and without feeling the slightest discomfort is, perhaps, the surest sign of a high degree of good health.

It is not difficult to suggest an alternative course of dieting for those who are rather afraid of fasting. For instance, if only diluted fruit juice or tender cocoanut water be taken three or four times in the day, it will be an approach to a fast. But my advice to you is not to fight shy of a short fast. Some people will frighten you into thinking that any kind of fasting is fraught with danger and should never be undertaken except in the presence of an expert. Such propaganda only serves the interests of the so-called experts. Anybody can undertake a short fast safely, provided he observes some simple rules. The main principles will be indicated, but a fuller understanding of the science of fasting can be had by going through my father's *Fasting Cure*.\*

To say that fasting is good is to minimise its importance. Fasting in some form is an absolute necessity both for the preservation of health and eradication of disease. Fasting for health is of two kinds: FASTING FOR A FEW HOURS EVERY DAY and FASTING FOR A FEW DAYS EVERY MONTH. Of the two kinds, the first one is absolutely necessary for all people. The stomach and other digestive

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\* *Fasting Cure*, by Sri K. Lakshman, Published by The Nature-Cure Publishing House Limited. (2nd Edition)

organs should have complete rest from digestive labour for a few hours at some time or other every day. This is the main idea underlying the NO BREAKFAST PLAN advocated by Dr. Dewey.

## ACUTE INDIGESTION

Acute indigestion is characterised by the complete breakdown of the digestive function accompanied by acute discomfort of some kind. This is very easy to cure, but a genuine case of acute indigestion rarely comes for treatment at the hands of a Naturopath. We generally meet with an acute phase of the disease with a background chronic of ill health.

It is not difficult to distinguish between these two conditions. A genuine acute disease has no history behind it. It is possible only when the person enjoys a fair degree of health. Hence it is to be found only in younger persons.

In a genuine acute disease acute distress will be easily relieved within a day or two by fasting and water-cure methods. When these measures fail to give relief, the inference is that the disease has a background of chronic ill health.

Acute indigestion is generally associated with all kinds of fevers. Fasting is the rule in such cases. For more details regarding treatment in such cases, the reader is referred to the *Practical Nature-Cure* of which mention has so often been made in these pages.

Fasting alone will suffice to cure acute indigestion. But for affording immediate relief from distress, some other measures are also necessary.

*Induced vomiting:* Vomiting induced in a non-violent way is very useful in relieving acute

distress in the stomach. Distress in the stomach is generally due to presence of irritating fluids. The irritant may be either hydrochloric acid (when it is in excess of the normal) or organic acids formed as a result of fermentation of the undigested or partly digested food."

In most cases, a complete emptying of the stomach may not be necessary, nor even desirable. It is the last portion coming out of the stomach which irritates the throat most. When relief can be obtained by partial vomiting, why should one unnecessarily irritate one's throat. The major portion of irritating liquids will come off in the beginning; the solids will be last to come out. But for relieving distress it is enough if a greater part of the irritating fluids are removed. The solids which remain will, ordinarily, be digested easily afterwards.

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\* Fermentation starts in the stomach only under very abnormal conditions, when the food stays too long in the stomach. Such a condition will be produced when

- (1) Starch and protein foods are mixed,
- (2) Food is eaten before the stomach is not empty, that is, when the previous meal has not yet passed out of the stomach, or
- (3) Snacks are eaten in-between meals.

The reason is simple enough. Firstly the presence of too much of starch along with protein will interfere with protein digestion in the stomach. In the stomach, starch is not digested, and if it is present by itself, it will pass off very quickly from the stomach. But if protein is present along with, the starch also has to stay in the stomach for an unduly long time. Hence there may be fermentation. Again, when anything is eaten when the stomach contains partly digested food—food which has already stayed in the stomach for a few hours—the digestion of both will be disturbed; a good part of the partly digested food also will have to stay in the stomach till the newly eaten food is digested. The net result is that the food which was eaten first stays in the stomach for over 12 hours. Naturally there is fermentation. If one avoids eating when the stomach is not empty ninety percent of the causes of fermentation will be eradicated.

For emptying the stomach a stomach pump is not needed. Vomiting can be induced easily without any instrument.

Emetics are also not desirable. Drink plenty of water, preferably warm, till the stomach is completely full and no more water can be taken in. Squatting is the best posture for vomiting, because there is maximum pressure on the abdomen both due to bending at the hips and to the pressing of the thighs. Sit down with feet on the ground, knees drawn up and hams (buttocks) close to, or almost touching the heels. Crouch forward. Introduce the middle- and fore-fingers as far into throat as possible and pass them up and down, thus tickling the throat. The contents of the stomach will automatically come out.

The first portions of liquid, which come out will contain much of water which has been drunk and hence irritation may not be much. But in later portions the concentration of acid will be greater and irritation will be much. Hence it is better to drink more water a second time, before vomiting out the last portions.

Immediately after vomiting, and also in the middle of it, (if the vomiting becomes painful and takes more than a few minutes) wash your hand, dip it in cold water and rub the abdomen gently. This rubbing should be done from above downwards and also from left to right, and may be done either by oneself by an attendant.

In most cases, distress in the upper abdomen will cease within a few minutes after vomiting; in some cases where it does not cease completely, it will be lessened considerably. If distress continues even after vomiting, apply a fairly tight, cooling abdominal wet bandage and go to bed.

Occasionally, the act of vomiting may itself lead to a feeling of weakness. But this weakness will pass off if the person rests in bed for some time. A spinal bath combined with a hot water foot bath, and, if necessary, with blanket covering, for not more than 20 minutes will be very helpful. After the bath, wipe yourself dry and go to bed.

After vomiting, sip from time to time small quantities of plain water, hot or cold, whichever is relished. As a rule, no food, liquid or solid, should be eaten for at least 12 hours after vomiting. The best course is to fast for 24 hours on water only.

[A word of warning here will not be out of place, in view of certain instances which have come to my personal notice. A patient who was suffering from severe stomach trouble was taught to vomit. He learnt it easily, and was surprised to find in this procedure, a very simple way of getting free from any sort of pain due to indigestion. He formed the wrong notion that he could go on eating as he liked and escape the consequences of such licentiousness by vomiting afterwards. But one cannot have the cake and eat it too. Nature cannot be fooled so easily. Vomiting is movement of the food in a direction which is reverse of the normal. If one vomits too often the normal peristaltic activity will be impaired and the digestive apparatus will be weakened. Those who suffer from what is termed *nervous dyspepsia*, should be particularly careful. The sensible course is to order one's life in such a way so that the need for such a measure will not arise.

However if precautions mentioned earlier are observed, and if it is not overdone, vomiting does no harm. On the contrary, it does good. Personally, I am careful about what I eat. But occasionally, it does happen that I commit some mistake either

because of weakness of the will or due to some environmental disadvantages. Even then, I do not get any trouble unless the same mistake is repeated two or three times. But, if there is the slightest feeling of uneasiness, I shall empty my stomach immediately by vomiting. However such occasions occur only once in several months.]

Vomiting is the opposite of peristalsis—the normal movement of food along the alimentary Canal—and hence the stomach needs rest after that. Fasting is the only means of giving rest to the stomach.

The benefit derived from the fast is greatest if the bowels are also kept clean. If natural bowel motion is absent, or if it is inadequate, the use of the enema is necessary. The enema as it is used by allopaths is positively injurious, especially, if it be taken frequently. It is a pity that most professional Naturopaths too should be ignorant of the rational, non-violent use of the enema. Instructions will be set forth briefly in a later section; fuller information can be had in Practical Nature-Cure.

After the fast, the following plan or some other one, along the same lines, should be followed:—

# I

9 a.m. Breaking the fast with a glass of one of the following:—

1. Diluted Fruit juice\* (Orange, Mosumbi, sweet lemon)
2. Vegetable soup (leafy vegetables preferably)
3. Tender cocoanut water.

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\* Some patients may not like fruit juice which is even slightly sour. The other two alternatives will be more suitable in such cases. After they are well, these persons also will begin to like fruits like orange.

- 1 p.m. Cooked Vegetables. (To be conservatively cooked. No spices. Salt alone to be added.)
- 7 p.m. 1 glass of milk (8 oz.)  
and 3 medium-sized, fully ripe bananas,  
or an equivalent quantity of any other  
fruit.

If need be, the same programme may be followed for two or three days subsequently. By this time, if the acute indigestion had no background of chronic (long-standing) ill-health, the patient will be quite fit and digestion will be normal. He may then change over to one or other of the two programmes out-lined below: (It should be clearly understood that there is no rigidity about the diet plans which have been suggested. If the patient has understood the principles of Vital Economy and Positive Diet, as taught by Sri K. Lakshmana Sarma, he can easily evolve a plan of his own which will suit his bodily condition, environment and financial means.\*)

## II

Up to 10 or 11 a.m. Nothing except water.

- 11 a.m. Meal consisting of rotis (or rice) and  
cooked vegetables. (A small spoonful of  
butter, and a cup of curd may also be  
taken.)
- 7 p.m. A glass of milk  
2 to 4 oz. of dried fruits (one kind only.)  
Some fresh fruits (one kind only.)

## III

### ALTERNATIVE PLAN

- 9 a.m. A glass of buttermilk with 1 oz. of the  
raw juice of vegetables added to it.

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\* Those who have work at office or school during the day should make a slight modification in the plans suggested. They should take the lighter meal during the day and the more substantial one at night,



- 1 p m. Meal of rotis (or rice), vegetables and curd or buttermilk.
- 8 p.m. A glass of buttermilk and raw vegetables (the vegetables may be taken whole or made into a salad.)

After following the above mentioned plan for a day or two, the patient may go back to the normal diet. This course will suffice to cure all stomach troubles which are not chronic.

## WATER-CURE METHODS

At the time of its birth, Nature-Cure was little more than water-cure. Perhaps because of this, Nature-Cure is popularly understood as a system of baths and packs. But actually water-cure is only a part of Nature-Cure. Water-Cure methods are most efficient in the case of young people--the younger they are, the quicker the result--and in acute disease. In the case of older people and in chronic and destructive disease, water-cure will not produce much good.

Even in acute cases, fasting gets the first place; baths and packs are only next in importance. Some extremists there are, who would totally dispense with water-cure, relying only on fasting and dieting. The disease can be radically cured that way also, I do not deny that. But it cannot be denied that baths and packs and enemas do help to calm down the distressing symptoms, and are an invaluable aid in purifying the body. To give only a few examples: The Coma bath is an ideal one for brining the patient back to his senses; the cold spinal bath is an excellent tonic for the nervous system and improves blood circulation; the hip

bath invariably succeeds in removing the heat from the abdominal area; the stimulating wet pack brings out the heat which is latent in any part of the body; the abdominal wet pack, or earth pack removes congestion in the abdominal area, soothes the nerves and alleviates pain.

Many people think that Water-Cure applications aim at removing heat only. This is a mistake. Where there is high fever or intense heat in some part of the body (accompanied by pain, irritation or a burning sensation), due to congestion or inflammatory changes, the main purpose of Water-Cure is to remove heat. Otherwise Water-Cure only aims at a redistribution of heat. In fact, it is possible to warm up the whole body or a part of it, by means of cold water applications only.

In Water-Cure applications, as in all other measures of Nature-Cure, it is not the water which cures. Cure is only the result of the vital response to the use of water. In mild cold water applications this vital response is seen in the warming of the whole or part of the body. Where such response is lacking, hot water applications, or hot water applications followed by cold water applications are more suitable.

Some simple Water-Cure measures are described below: It should be acknowledged that many of them have been adapted from Sri K. Lakshmana Sarma's Practical Nature-Cure.

*The Cooling Abdominal Wet Bandage:* Properly applied, this is a tonic of great value in serious acute troubles and also in chronic or obstinate cases of all kinds. It is specially valuable in all kinds of digestive disorders, chronic constipation,

loose motions, cases of so-called nervous debility, and all those in which there is obstinate heat in the interior abdominal organs. But when there is no acute discomfort which needs to be relieved immediately, and in the case of persons with low vitality, and particularly, in the cooler hours of the day, the *stimulating wet pack* will be more suitable.

The abdominal wet bandage is a broad bandage of wet cloth worn round the abdomen. The cloth used should be soft, thick and capable of absorbing water easily. Cloth washed with soap will not satisfy the last condition and hence unsuitable for our purpose. The cloth may be folded two or three times so that its width is 9" and thickness about  $\frac{1}{4}$ ". Drench the cloth in water, wrap it round the abdomen and pin it up as shown in the figure.

If the patient is weak and feels chill, cover the wet pack with a coarse woollen wrapper so that the pack may get warm with the internal heat, while the water slowly evaporates and escapes through the meshes of the wrapper. Oil cloth, rubber cloth, or plastic sheet should not be used in the place of wool, for obvious reasons. If the person is robust, and the season hot, the outer woollen covering may be dispensed with.

The bandage may be removed when an itching sensation arises or after 3 to 5 hours. A short spinal bath, or the abdominal wet message, will be a good finish for this treatment.

No case can be considered hopeless until this has been tried long enough. Where the lungs are diseased or malformed, this bandage should alternate with *stimulating wet bandages* for the neck and chest.

Because the abdominal bandage can be worn for many hours at a time, and is exceedingly mild in its action, it is considerably more effective in chronic cases than the cooling baths which can be taken only for a short time.

*The Abdominal Earth Pack:* This is a broad pack of wet earth or loamy clay over the abdomen. This is applied under the same conditions as the *abdominal wet bandage*, but is more effective than the latter. If a woollen covering is needed, cover the earth pack with a thin, wet cloth and put the woollen covering over the cloth.

Earth to be used for this purpose should be the purest available. Ant-hill (white ants) earth is found to be very suitable for this purpose. Where this is not available use earth taken from high ground, since that in low levels is likely to be unclean. All coarse sand and stones should be removed from the earth before using it. Loamy clay—that is, earth composed of equal parts of fine clay and fine sand is the best.

Other directions are the same as those given for the *abdominal wet bandage*.

*The Stimulating Wet Bandage:* This is especially suited for patients with lowered vitality, where there is need to bring out the heat from the interior. Within about ten minutes after its application, the pack should get warm. That is the test of its success. A single layer of wet cloth (soft cloth capable of absorbing water easily), 6 to 9 inches in width, worn round the abdomen and covered over with wool or flannel will be sufficient for this purpose. If this pack succeeds in bringing

heat to the surface of the abdomen, it may be removed, a cooling abdominal wet bandage put in its place, and kept up for as long as it is pleasant to keep it. Generally however, the stimulating wet bandage for the abdomen is applied in the early morning and kept up for about 2 to 3 hours. It is not necessary that the patient should remain in bed. He may, if he is weak.

Dip the cloth in cold water, wring out the water somewhat, wrap it round the abdomen and pin it up. Cover this with one or two layers of wool or flannel. If the patient feels chill, he may lie in bed and cover himself up to the neck with a blanket.

Within ten or twenty minutes, the compress should become warm. This is ascertained by placing one's fingers between the cloth and skin, when warmth will be felt. If there is no warmth the pack has been a cooling one instead of being a stimulating one. But there is no cause for alarm. Remove the bandage and give the abdomen dry friction rubbing with the palm for about two minutes. Next time put the bandage when the day is warmer, use thinner cloth, or wring it out fully.

*Hot Fomentation (Wet) for the Abdomen:* This is good for relieving any kind of distress in the abdominal region. Get ready two clean Turkish towels, a piece of tough cloth which will not absorb water easily, and a basin of hot water (just too hot for touch.) Fold the towels so that they are just large enough to cover the abdominal area. Dip one of them in hot water, wrap it up with the tough cloth, and wring out the water. Spread the folded, hot towel over the patient's abdomen and keep gently pressing with the hands. In the meanwhile the

other towel should get ready, so that by the time the first one becomes cold, the second may take its place. The fomentation may be continued till relief is obtained. Finish with a cold pack for the abdomen for about ten minutes.

*Alternate Hot and Cold Applications:* Where the pain is severe, alternate hot fomentations and cold packs will bring quick relief. The relative durations of the two should vary with the condition of the patient. For robust patients, the cold one may be applied for a longer time (say 5 minutes) than the hot one (say 3 minutes) for weak patients, the hot fomentation should be applied for a longer period.

### CHRONIC INDIGESTION

When indigestion becomes chronic, it is given the more respectable name of dyspepsia. Dyspepsia is at the root of all other chronic or destructive disease conditions. It is only natural therefore that this should be the commonest disease.

"At bottom," writes Sri K. Lakshmana Sarma in his Practical Nature-Cure, "every chronic and even every destructive disease, such as tuberculosis, is dyspepsia of some degree." Though the medical profession does not admit this, many medical writers have made the observation that dyspepsia is always present in all chronic or destructive ailments like, tuberculosis of the lungs, diseases of the heart, liver, kidneys etc., diabetes, asthma.

It is therefore natural that dyspeptics should show, or develop during the course of their treatment, symptoms of some other disease. No special treatment is necessary in such cases, except perhaps, for some local water-cure applications for giving immediate relief; for the Nature-Cure treatment for all chronic disease is the same as for

dyspepsia. The remarkable success of such a procedure should be sufficient proof of the fact that dyspepsia is at the root of all chronic disease.

Some typical illustrative cases have been given below, not to serve as a guide in the treatment, but only to show that a natural cure, however crude and defective, must succeed where the best medical skill can do only harm in the wrong run. The cases have been carefully chosen so as to be of a varied nature. Some of them have already passed into history. But the main point to be noted is that the patients came to Nature in a desperate mood. In the last three cases, particularly, allopathy had been given a full trial for several years but the condition only worsened. Nature-Cure and allopathy are irreconcilably hostile to each other; hence a patient who has been heavily drugged allopathically is infinitely more difficult to cure than one who has not been so treated. In spite of these handicaps, Nature-Cure has remarkably succeeded in these cases.

### OBSTINATE PAIN IN THE STOMACH

In ancient Rome, there was a famous man named Cicero. His nephew, Agricola, was suffering for many years from an intolerable pain in the stomach, which was due to an obstinate indigestion; all the medicines, which he had so far tried, had proved useless. He at last made up his mind to end his suffering by fasting to death. He chose this way to death, because he thought he would thus punish his stomach, which he believed to be the cause of his miseries. It never occurred to him that he was himself the offender, and that the injured party was the stomach. This fact however, was borne out by the result of the fast. The fast was exactly what his stomach was wanting all the

time; only he never knew it till then. The result was that not he, but his disease died, leaving him alive and well. By fasting he gave the stomach, that long-suffering and much-misunderstood organ, all the rest that it needed; Nature did the rest, and he was cured.

## A CASE OF GASTRIC ULCER

(Gastric ulcer is generally common among anaemic women. Because ulcers appear only in those parts of the alimentary canal which come into contact with gastric juice, it has been stated in medical text books that the formation of ulcers is due to the action of hydrochloric acid in gastric juice. At this rate there is nothing to prevent gastric juice from digesting and dissolving the stomach itself; protein is the main constituent of stomach walls and gastric juice can digest protein. The fact is that so long as every part of the stomach retains its tone and vitality, gastric juice can have no action. The human stomach can digest the stomachs of other animals, if they are killed and eaten. Cannibals do digest the stomachs of other men whom they kill and eat. But one's own stomach is not digested. Why? The secret is that a stomach which is alive, a stomach which has a rich supply of blood, cannot be acted on by gastric juice. When the stomach does not get its needed supply of blood, its walls lose their vitality and tone, and it is then that gastric juice acts on them, leading to formation of ulcers. That is why ulcers in the stomach are associated with an anaemic condition of the blood. Whether loss of vitality and degeneration is associated with a bacillus is not of importance to one who understands the Nature-Cure view of the role of bacilli in the causation of disease.)



Once there came into the hands of American, allopathic doctor, a patient whose stomach was "very bad". Neither food, nor water, nor medicine would stay in it for an hour; it was all vomitted soon. Another patient, who was suffering in a similar way, was in the hands of another doctor at the same time; this latter doctor was a blind and stupid follower of the orthodox way, whereas Dr. Dewey was open minded, and was capable of unlearning what is false, and of understanding and accepting what is new, even though it be new.

It seemed to Dr Dewey that in this case Nature was loudly calling out that she did not want medicines, nor food. So he stopped both food and medicine, and contented himself with watching the case; the patient was spared the agonies of vomiting the unwanted food and drugs. After many days the patient craved water; water was given and retained. In a month the stomach was so far restored by the rest given to it by this wise physician, that hunger returned and then such food was given as the patient herself desired, and this was retained and assimilated. The patient was thus cured in a month, with very little suffering.

The other patient, who was in the hands of the blind allopath, had to suffer terribly for three months and then died. She would surely have had a far better chance with Dewey as her doctor.

### A CASE OF GASTRIC ULCER WITH A BACKGROUND OF SEVERE ANAEMIA

This again like the previous one was an acute phase with a chronic background. The patient was my mother who was treated by my father. The case has been recorded in my father's "Constipation and Dyspepsia."

The trouble used to come punctually within six months of the birth of a child. The first time it was very serious; there was great suffering after eating, which ceased only after the food was vomited; in the course of a few weeks the state of the patient became very serious; there was a general swelling all over and breathlessness was apparent on the skin. At this stage the disease was suppressed by the use of an allopathic mixture containing bismuth salicylate and other poisons (sedatives). It was even anticipated that the disease would return, and so a copy of the prescription was obtained and preserved. The patient recovered for the time being, but her health was distinctly lowered and she remained an invalid for long after. There was no trouble after the birth of the second child, who died within eight days. Thereafter the disease appeared regularly after each confinement, until the year 1913. On the earlier occasions the same mixture was employed; later a patent medicine known as Hewlett's mixture was used. Each time the disease was more quickly suppressed, with a still further lowering of health, so that life became a regular martyrdom. After the birth of the fifth child, there were two spells of the disease; the first of these came in 1912, and was suppressed as before. At this stage, the patient began taking hip baths regularly in the afternoons, but there was no change in the diet. Probably as a result of this, the disease which was not cured, but only suppressed, was again brought out. The state of the patient, at this stage, was very alarming; she became pale, her cheeks, belly, hands and feet became swollen with fluid. But it was resolved that she would be radically cured this time by natural methods. Steam-baths every alternate day, and hip baths twice a day were given; the diet was cut down to

plainly cooked vegetables and rice, and there was only one meal a day; sauces and other appetising foods were excluded. The swellings subsided; unnatural craving for appetising food became less; but food was not vomitted. In the course of a month, the appetite and digestion became normal. It will be noted that the danger to life was averted as soon as the right treatment was begun. She lived for thirty-four years after this cure, and gave birth to two more children, without getting a return of the disease.

*Comment :* The main point to be noted here is that the diet was reduced to one meal a day, of rice and unspiced, *sattvic* vegetables only. Such an unappetising food will be relished only when there is hunger. The most important point in the treatment of a dyspeptic is that hungerless eating should be carefully avoided. It would have been better if the treatment had begun with a short fast of two or three days. A programme similar to the one detailed below will be suitable in a case like this which was an acute phase of dyspepsia with a chronic background of ill-health.

Fast completely on the first day, taking water (warm or cold as desired) only. At the beginning of the treatment have two enemas, one warm and the other cold. A third cold water enema may be taken before retiring to bed in the night. In the early morning apply a stimulating wet-bandage; in the afternoon a cooling wet-bandage. Break the fast next day with a glass of tender cocoanut water, diluted fruit juice (1:1), or vegetable soup. Cocoanut water has been found to be ideal for digestive disorders; it may be taken about four to five times in the day. The bowles should always be kept clean, if necessary, by the use of an enema or

two. The same plan may be continued on the third and fourth days also. On the fifth day some cooked vegetables, a cup of milk (or a glass of buttermilk) and some bananas may be included (see pp. 52—3). An alternative procedure will be as follows :

8 a.m. Tender cocoanut water.

11 a.m. The tender kernel of two or three tender cocoanuts and some ripe tomatoes ( $\frac{1}{2}$  lb.)

3 p.m. Tender cocoanut water.

7 p.m. 8 oz. of milk (fresh, raw cow's milk) and 3 medium-sized bananas, or an equivalent quantity of Papaya.

The above mentioned plan is specially suited to dyspeptics because of its simplicity. This plan or some thing similar to this is generally prescribed to dyspeptics in Sarma's Naturopathic Sanatorium Pudukkottai, once they have passed the acute phase. After following such a plan for about a week, the patient may, (if the improvement in his condition warrants it) change over to a diet, the same as, or similar to the one suggested on page 53 (II) or (III).

In all cases of anaemic indigestion, sun-baths should not be omitted. In winter the best time for sun-baths is between 9 and 11 a.m.; in summer between 8 and 10 a.m. Tie a wet bandage round the head; keep the head in the shade and expose the rest of the body to the sun, under the covering of a green leaf. This bath may be given every alternate day; in the initial stages, the bath may not exceed a duration of ten minutes; but later the the period of exposure may be gradually increased, in about ten days, to half an hour or forty-five minutes. Sun-bath under green leaf covering has an additional advantage in that it is a mild substitute for a steam bath.

## A CASE OF DUODENAL ULCER

The case under reference was treated in *Sarma's Naturopathic Sanatorium, Pudukkottai*. The patient was aged 55 years and the disease was a long-standing one; twelve years of allopathic bungling had reduced him to a state of despair. In the early stages, severe pain would be felt some time after eating; the pain would be relieved by more eating. Allopathic doctors who treated him diagnosed it as a case of duodenal ulcer. A course of milk-diet gave him only temporary relief. At the time he was admitted into my father's Sanatorium, he was complaining of severe pain in the stomach almost all the time; often he suffered from severe head ache. The treatment lasted six weeks, by which time no trace of the disease was left. Apart from local, Water-Cure applications to relieve pain, the main part of the treatment, especially in the initial stages, was a diet of cocoanut water. For the first ten days he took nothing but the water of tender cecoanuts, (the tender kernel was not taken) about six glasses in a day. Afterwards for a few days he was eating besides, the tender kernel of two cocoanuts in the evening. Later he changed over to a diet of tender cocoanuts, ripe tomatoes, green leafy vegetables, a small glass of milk and bananas.

The point to be noted here is that the diet was increased only after the condition of the patient improved.

## NEURASTHENIA

In all cases of chronic indigestion, or dyspepsia, the brain and the nervous system of the whole body is abnormal in some degree; this abnormality is mainly due to the poisoning effect of the toxins formed as a result of indigestion and constipation,

and may partly also be due to malnutrition arising from indigestion. Neither food nor medicine can restore vital vigour to these vital organs. That is why allopathy woefully fails in all cases of dyspepsia.

There is one medicine which can restore vital vigour to the nerves and that is Life itself. Life is not something which can be bought in the market in beautifully sealed bottles; it is in us. All we can do is to remove the impediments which prevent Life from doing its work; we can cleanse the body; we can also shut out all channels of vital waste and economise Life. Indeed Nature-Cure aims at doing only these things and no more. *Vital Economy* and *Positive Diet*, these two things sum up the whole of Nature-Cure.

But when dyspepsia is treated medically to the very end, the nervous affection becomes serious, and then the disease is given the high-sounding name, *Neurasthenia*. An honest medical authority defined neurasthenia as follows: *When a patient comes to you with a long tale of woe, and after examining him thoroughly, you find there is nothing wrong with any of his organs, particularly, then you can say he is suffering from neurasthenia.*

Probably because they do not want to face the fact that neurasthenia is, more often than not, the result of medical bungling in the treatment of dyspepsia, medical men try to make it out that neurasthenia is not a disease of the body, but of the mind. In a case reported by my father in his *Constipation and Dyspepsia*, a neurasthenic patient under medical treatment "took generous rations of highly nourishing foods, but this had no effect upon his disease, and when he complained of this want of improvement, he was told that as his

weight had increased he must have been cured and that he was only imagining disease." Imaginary indeed! If the patient gets "a feeling of sudden stiffness" and becomes "unable to walk when passing along the road," is it an imaginary disease? The heavy eating has clogged the nerves and other tissues to such an extent, that the muscles of locomotion suddenly fail sometimes. This is not the way to cure diseases of the digestive organs.

It is nonsense to say that dyspepsia and neurasthenia are imaginary disease, and advise the patient to imagine himself healthy, as a means of getting well. "The honest doctor is one who freely confesses that these disease conditions are beyond the power of medical science to cure, or even to relieve, without, in the end, making the patient worse than ever before."

## A TYPICAL CASE OF NEURASTHENIA

The patient in this case was my father, treated by himself. He began life with a heavy inheritance of the seeds of disease; constipation, piles, fistula of the anus, dyspepsia and their kin were among the best known ailments in the family. The upbringing was, as my father himself puts it, anything but right. It is not necessary here to trace the whole history of his progress in ill-health, because he has given it in detail in his "Practical Nature-Cure." I shall content myself with describing (in his own words) the state of his body and mind at the time he sought refuge in Nature in the year 1912 (he was then aged thirty-three) and his healthward progress under Nature-Cure.

"The nerves and skin had by this time completely lost all powers of adjustment to the climate; summer

and winter were alike trying; very heavy woollen clothing had to be worn nearly all through the year, the feet had to be encased in two pairs of thick woollen socks inside the shoes. Almost every year there was a chronic cough which lasted till summer. This interfered very greatly with sleep, as the coughing fit usually began about bed-time and went on till about three in the morning.

"But the worst part of the trouble was intangible, being wholly mental; spells of melancholy and despair were very frequent and each spell lasted long; sleep would often be cut short by nightmares or fearsome dreams; thoughts of suicide were haunting the mind; it was felt that at any time a suicidal mania might arise and overpower the mind; hence the sufferer had to give a wide berth to wells in lonely spaces and to railway lines when trains might be coming. The memory was weakened; the power of attention was also declining; it was next to impossible to listen to clients' accounts of their law cases, or to think coherently in the course of business. The author (Sri K. Lakshman) had nourished the hope of winning fame as an author from his boyhood—a hope, which had been encouraged by many circumstances; but the rising tide of dyspepsia soon quenched it utterly. There was only one hope—from death, the friend of the hopelessly afflicted; to retire to a lonely place outside the town, and sit there, meditating on death and the after-life, was a pleasant occupation.

"The doctors said that there was no disease and that it was all imaginary; but that was because they did not know the right means of cure; they were foolish enough to say that the sufferer had only to imagine himself cured in order to be quite healthy. Perhaps they got this notion from Emile Coue, the advocate of auto-suggestion.



"In the beginning of 1813 the message of Louis Kuhne was again preached to the author, and this time it was accepted, though without hope; a copy of Kuhne's book was purchased and gone through. The book proved to be a revelation.

"The author (Sri K. Lakshman) thoroughly enjoyed the reading of Kuhne's book; it shed light on many of the dark places of medical science, and explained why the author had failed to find a cure so long. But the enjoyment was purely *impersonal*. The reason was that in that book there was no message of hope for the author himself; Kuhne made it plain that when the foreign matter was deposited chiefly on the back side—so as to involve the *nervous* system and if the encumbrance had passed on to the *third* stage—the stage of emaciation—there is no hope of cure; at the most there can be some alleviation. This was exactly the author's (Sri K. Lakshman's) condition.

"But by this time the author had ceased to care for life; it was not necessary for him to hope for cure, in order to accept the new system. It was clear now to the author that allopathy is an evil thing, to be *renounced at once*. Other systems such as exercise, breathing and auto-suggestion had been tried, and found to be useless or impracticable; but while life should last, some palliative treatment would be craved, and for this purpose Kuhne's diet-and-bath-system was the best possible. There was the hope however that life might be prolonged so as to enable the author to verify the teachings of Kuhne,—so that his gospel of health might be carried to other sufferers. So the author took a vow renouncing allopathy, and resigning his case utterly to Nature, without hope. and yet without fear.

" The principal meal of the day was taken at about 10 a.m.; this was a mistake; for after the meal the author had to go to his work at Court; but it did not do any great harm because there was little work to be got through at Court except occasionally; when this happened, the author sometimes varied the plan, postponing the meal till after his return from Court. The meal generally comprised rice and conservatively cooked vegetables *mixed and eaten as one course*: sauces, pickles and buttermilk were, for many years, given up entirely; the vegetables too were taken almost plain, that is, with only a little salt. The morning coffee was renounced; but in its place a cup of raw milk was taken without sugar; this too was given up on reading Dr. Dewey's book on the No-Breakfast-Plan. Once a six days' fast was gone through; but afterwards there was no fasting except during actual illness or prostration.

" Kuhne's baths were at first taken more or less regularly; there were two baths a day; Kuhne's size-bath was found to be unpleasant, because both hands had to be in the cold water all the time, and the circulation of the blood was too weak for a quick recovery. In course of time the author devised the Spinal Bath, the Piece-meal Cold Bath and other new methods. The use of enemas was also adopted and boldly experimented with, these experiments led to the discovery of the non-violent, the tonic and the combined enemas. Once in treating a patient, the wet cloth cooling application was discovered. Another time an onset of cough at bed-time led to the invention of the throat-cooling device which is the surest method of temporarily relieving cough, however violent. Experiments in hot baths were fearlessly made; there was, in those days a great craving for warm baths, and this craving was respected, notwithstanding grave warnings culled from

books and sent by a kind friend; it was found that there is more good than harm in hot baths and that it is possible to escape the harm.

"Curative crises such as fevers, eczema, boils, dysentery and the like occurred from time to time; but Kuhne's teaching on this point—the inevitableness and goodness of acute crises—was so well assimilated that they caused no fear, nor any inclination to go back to the doctors. In six months the author was thoroughly convinced of the utter soundness of Nature-Cure and the utter badness of allopathy.

"The gains in health were slow in coming; often it seemed that the vital powers were exhausted; but a few days' rest and fasting were enough to dispel the weakness and restore health. Journeys by rail from end to end of the country became possible. Besides, the greatest extremes of climate and weather became tolerable. The cold air of the open became a well-beloved friend; it became impossible to breathe the tainted air in houses.

"On many occasions, but at great intervals, the health seemed to breakdown utterly but was more or less quickly restored by low dieting, sunbaths and other baths. On one occasion, however, the breakdown was very severe. To get over it the author began to subsist on water of tender cocoanuts alone and continued this plan for a fortnight. Afterwards he changed to a diet of raw milk and ripe bananas. He continued on this plan for six months intending thereby to allow the constitution to recuperate. The result was, for many years afterwards there were no breakdowns of health.

"The most remarkable thing however was the return of the lost faculties of mind."

## TREATING THE CHRONIC

Chronic disease does not develop all of a sudden ; its development is a slow process, being the result of years of wrong living. (Of course I make due allowance for the fact, that if medical people make up their minds they can make you a confirmed chronic within a week by heavy drugging.) A disease which develops slowly cannot be eradicated in a day ; it will take atleast a fraction of the time it took to develop. It may be a matter of a few months ; it may even be a few years. In some cases a complete cure may be out of question ; vitality might have been so far lowered that very little may be left for effecting a cure, or the disease might have led to some structural weaknesses which can only be partially made up. My father's case was one such. He has not been cured completely. But almost all the time he gets on as though the disease has been completely eradicated. At the age of seventy he is infinitely more alert and active, both physically and mentally, than he was thirty-five years ago under the benign care of doctors and drugs. Once in several years, he gets a relapse of his old complaints in some form or other, when he fasts or takes to a very low diet, and the trouble subsides within a few days, or weeks. The fact is that his inherited and accumulated load of filth is too heavy to be thrown out in one effort. So Life makes a series of such efforts, with a sufficient interval in-between to allow for recuperation. Yes, he has surrendered himself, entirely, to Nature ; he obeys Her dictates, and She looks to the rest. He is not alone in this self-surrender ; there are thousands like him all the world over ; there are hundreds in this country and also abroad who have come to this way either

through personal contact with him, or through his writings. Not one of them has had an occasion to regret having taken such a step.

I said, the cure will be a slow process. But the healthward progress starts, the moment the right treatment is adopted. Because, say, the cure takes about a month or two, that is no cause for running away from Nature-Cure; for Nature-Cure is inevitable; it is the only way there is. If health was lost through drugging and wrong living, it can be got back only through druglessness and right living. After all what is Nature-Cure but right living and druglessness?

I said, right living is the only cure there is. But that alone is not enough. One must also make amends for the past wrong living. If he had over-eaten in the past, he must now fast for a few days, or atleast for a few hours every day. If he had been eating only disease-causing food, he must eschew them completely and take only health-giving, cleansing foods.

## DIET FOR CHRONICS.

Foods may be divided into two classes—primary and secondary. Primary foods both nourish the body and cleanse it; they are necessary both for the preservation of health and eradication of disease; as such they are necessary for all people, both healthy and sick. Vegetables and fruits come under this class. For some time at least, sick people should be not alone vegetarians, but vegetablarians.

All grains are secondary foods; they are meant only for the healthy. So, so long as he has not reached a fair degree of health, a patient's diet should consist exclusively, or almost exclusively of

vegetables and fruits, to the more or less complete exclusion of grains.

Food, if it is cooked, should be in such form as to necessitate chewing; that is, it should not be watery. The habit of washing down every mouthful of food with water or some other drink is very bad. Food must be cooked with as little water as possible; it must be moistened with saliva in the mouth and not with water.

The habit of eating several dishes in the same meal should be given up, because it leads to over-eating. Every meal should consist of one dish only. Rice and vegetables or rotis and vegetables, will be considered as one dish.

Dyspeptics should not eat more than one substantial meal in a day. This meal also should be taken at such time as to allow for sufficient rest afterwards. One substantial meal (of, say, rice and vegetables, or rotis and vegetables), one light meal (of, say, fruits, or vegetables, or fruits and milk,) and one drink (of, say, fruit juice, tender cocoanut water, or butter milk)—this should be the rule for all dyspeptics even after they are cured.

## VITAL ECONOMY

The body is the machine; food is the material of which the machine is made, and also the fuel; Life is the operator of this machine. Without the operator the machine cannot work; without Life the body cannot function. Life is something apart from the material. We cannot sustain it; we can only conserve or economise it. Vital Economy is the economising of vitality or Life.

Food is necessary, no doubt, but it must not be forgotten that food is also a tax on one's vitality.

There are occasions when it will be wise to avoid eating.

We can economise our vitality by avoiding hungerless eating, because hungerless eating is the greatest tax on our vitality. But this raises the question, what is hunger?

## HUNGER

Hunger is the most misunderstood and the most misrepresented phenomenon of physiology. It is a matter of common sense that hunger should be a healthy sign; a sign indicating the readiness of Life to undertake the hard task of digestion cannot be anything but a healthy one. But from descriptions of it given in standard books on physiology and medicine, one gathers the impression that hunger is a condition of disease. It has been described as a gnawing sensation or a feeling of compression in the stomach. It is generally associated with a sense of weakness or fatigue. All these are symptoms of disease, but certainly not of hunger.

The first point that one should bear in mind about hunger is that it is not something felt in a particular organ of the body, namely, the stomach; it is not a localised sensation; it is felt all over the body.

The popular notion that hunger is characterised by fatigue and fainting is sheer nonsense. Those who have been really hungry know that it is a very pleasant sensation due, as it is, to a full glow of Life.

Hunger is not ravenous appetite. A really hungry man should be cool, and never in any great hurry to eat anything.

People dread hunger; they are taught to avoid hunger as they would do the plague. Such idioms as

"keeping the wolf from the door," give us an idea of the extent of popular misunderstanding on this subject. Hunger is something to be welcomed. It was a man who knew true hunger that wrote, "The secret of always being healthy, holy and happy is to be a little hungry most of the time." (E. Purinton.)

Let alone the allopathic and popular misunderstanding of hunger; so far there has been only one text book on Nature-Cure which gives the right idea of this important phenomenon of life.\* After reading this book, a Tamil pandit pointed out to its author that this view of hunger was in agreement with what was given in the *Holy Kural* of the Tamils as also in a commentary of the same by the ancient author, Parimelalagar (பரிமேலழகர்)

Lightness of body, an alert brain, a cheerful countenance, a readiness to do work, and a desire to eat simple, unappetising food—these are the correct symptoms of hunger.

Sleep gives only the strength to do work, but not hunger, because work is the physiological justification for eating. "By the sweat of thy brow, thou shalt eat," says the bible.

Hunger is driven away by hard work which leads to fatigue; it is also driven away by any kind of emotional excitement. Excessive exposure to the hot sun is known to kill hunger. Under such circumstances, what one needs is rest, both for the body and mind, and not food. A spinal bath, or a plunge in the cool waters of a river or tank will revive hunger.

Before hunger is felt, digestion in the stomach should be completed and stomach should get empty.

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\* Practical Nature-Cure, by Sri K. Lakshmana Sarma



It is now that the eliminative labours of life commence and proceed vigorously. Before hunger could be felt, elimination should be complete, and the body should be light. The bowels should therefore be kept clean in anticipation of hunger.

There are thus several stages in the maturing of hunger :—

1. Emptying of the stomach, indicated by the escape of a clean wind from the stomach, through the mouth ;
2. Clearance of the bowels ;
3. A feeling of lightness of the body and an inclination to do work ;
4. Physical activity which gives a keener edge to hunger when it is felt ;
5. Rest ;
6. Bath ;
7. Feeling of mature hunger.

## THE FOUR KINDS OF ERUCTATIONS

There are four kinds of eructations through the mouth which we should learn to distinguish from one another. The first one is the clean wind or a series of clean winds which one gets in the morning after getting up from bed. This is a sign of the stomach having become empty. Dyspeptics rarely get this more than once in a day. That is why we advise them to take to the one-meal plan. Healthy adults get it not oftener than twice a day, once in the morning and again in the evening. That is why we say that healthy adults should not eat more than two meals in a day. When the stomach is not empty, there can be no hunger ; when there is no hunger, there is no justification for eating.

The second eructation is known as the '*stomach's veto*.' It is had when one has eaten just enough. At this stage, the stomach instead of expanding further, drives off some air inside and makes room for the in-coming food. This wind, unlike the first one mentioned above, is not odourless, but carries with it the smell of the food being eaten.

The third kind of eructation is the '*remnescent wind*.' One gets this after one has eaten. If the meal was as light as it should be, there may be no such wind, or if at all, just one or two. But, after a heavy meal, there will be a series of such winds. As the name itself implies, these winds remind one of the food eaten, that is, they carry with them its odour. But it must be clearly understood that '*remnescent winds*' are by no means an indication of indigestion; they just indicate that the meal has been heavy.

The fourth kind of eructation is the '*sour wind*.' It is not a happy expression, but I have no other word for it. This wind, which is a symptom of indigestion and consequent flatulence, carries with it a sour taste and also a foul smell. There may also be acid risings in the throat; the wind may bring along with it some acrid liquid. Sourness may be due to fermentation, or due to excessive secretion of acid from the stomach walls. In some extreme cases where food has stagnated for more than a day the smell may resemble the odour of the gutter, in which case it should be due to putrefaction of proteins.

The Gita describes the act of eating as a sacred rite. The idea is that one should bestow as much attention to it as a religious-minded individual is expected to bestow on an act of sacrifice to God.

If only we bear in mind this teaching of the Gita and avoid hungerless eating, there would be no cause for indigestion.

## IMPORTANT RULES OF EATING

1. Eat only when you are hungry.
2. Never eat when you are tired or emotionally upset; postpone your meal, till the condition is changed.
3. If you take a solid meal at night, do not eat anything in the morning, but observe the no-breakfast plan.
4. If you have to be at work during day, do not eat the principal meal before, but after the work is over, as else the meal will not be digested.
5. Do not eat when the mouth is dry; you are not hungry then.
6. Let the food be as dry as possible.
7. Do not eat hastily; chew every morsel of food, before swallowing.
8. Stop eating when you get the 'stomach's veto'; you will then feel that you could take a little more. If you overstep this mark, though there may be no heaviness immediately after the meal, it will be felt after about two hours. Space must always be left for the movements of the stomach, and also for drinking some water when needful.
9. In one meal there should be only one course or one dish. If you eat grains, let there be only one kind of grain. Even in vegetables and fruits it is better to restrict oneself to one kind only; different kinds of them may be eaten at different times.

10. Let not your food be highly seasoned with salt, chillies and sour articles like tamarind, so as to be appetising and thus inducing over-eating, let your food be un-stimulating to the sense of taste as Kuhne says.

11. Avoid the following articles: spices and condiments, stimulants like tea and coffee, fried foods, preserved foods, biscuits (market), peppermints and chocolates. Eat very sparingly and that too only occasionally of high protein foods, like pulses and grams.

12. Eat only one substantial meal in the day; the other, if eaten, should be a light one even if you are hungry for it; it should be light both in quantity and quality.

### A GENERAL LINE OF TREATMENT FOR THE CHRONIC

As has been pointed out already, there are two phases of chronic indigestion:

1. Acute phase.
2. Chronic phase.

The two phases generally appear alternately till the disease is radically cured. The acute phase will not continue for more than a few days; rarely it may last for a few weeks. A single, uninterrupted chronic phase may last for a few weeks, months or even years. The treatment will vary according to the phase of the disease.

In the acute phase the disease will be patent and severe; in the chronic phase it will be latent and mild. In the acute phase digestion may come to a standstill or become very weak; in the chronic phase digestion will go to completion if the individual observes the rules of eating enumerated earlier. As the disease is being cured, the chronic phase will become longer and milder—often so mild that,

for all practical purposes, the disease may be considered to have been cured completely.

Treatment in the acute phase should begin with a fast or at least an approach to a fast for a period of three days to a week. Tender cocoanut water, diluted fruit juice, or thin vegetable soup taken about two to four times in a day will constitute an approach to a fast. After the fast, pass on to an exclusive diet of vegetables and/or fruits for another week or so. As the condition improves, slowly increase the ration and come to the one-substantial-meal-a-day plan and stick to it till the disease is cured, or till another acute phase of the disease comes up, when again, you must resort to a fast. This time the fast may be of a shorter duration, say, one to three days.

If the disease is in the chronic phase, start on the one-substantial-meal-a-day plan and stick to it till you are cured or till an acute phase comes up.

I do not advise a long fast for anybody. Apart from the fact that a long fast needs the attendance of an expert, it is questionable whether a long fast will do good to all chronic sufferers; it may even do harm to some.

The kind of fast which will do immense good to all people, both healthy and sick, is the *Instalmental Fast*. The instalmental fast, is a series of short fasts with longer intervals of reformed dieting along lines indicated earlier. This instalmental fast is of two kinds:

1. Fasting for a few hours every day;
2. Fasting for a few days every month.

Of these two, the first is the more important, and is provided for in the reformed dieting itself. The second one will be very helpful in hastening the cure.

During a fast, keep your bowels clean by means of an enema or two. The benefit of the fast is then greater than otherwise. Keep cheerful. Take to meditation, if you are so inclined. Do not exert yourself; but conserve your vitality for the task at hand, namely cleansing of the body. Be careful in breaking the fast. Do not rush to make up for what you have not eaten so far. I have already explained how to break a fast. If the fast is a one-day one you must take one day to come to your normal food, that is you must take normal food only the day after.

## OTHER AIDS TO TREATMENT.

### (1) SELF-MASSAGE\*

Though everyone knows that massage does some good, few are aware that quite good results can be obtained with *Self-Massage*. The stomach is a deep-seated organ in the abdominal cavity and hence it will not be possible to influence it through self-massage. But, as either constipation, or its opposite, a too relaxed condition of the bowels, nearly always accompanies indigestion, intelligently applied self-massage of the abdomen does yield good results. Obviously, if we can help the small and large intestines to do their work more thoroughly and well, then we can at the same time greatly help the digestive system generally.

The self-massage movements given below are quite easy to learn and perform. They should all be done whilst lying on your back, with knees well-drawn up towards your body, bladder emptied and the body quite limp and relaxed. All sudden digs, jerky movements and the like should be avoided. Try and get a smooth, even, yet deep and searching action over the whole of the abdomen.

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\* Adapted from Milton Powell's "*How to Cure Indigestion and Stomach Troubles*"

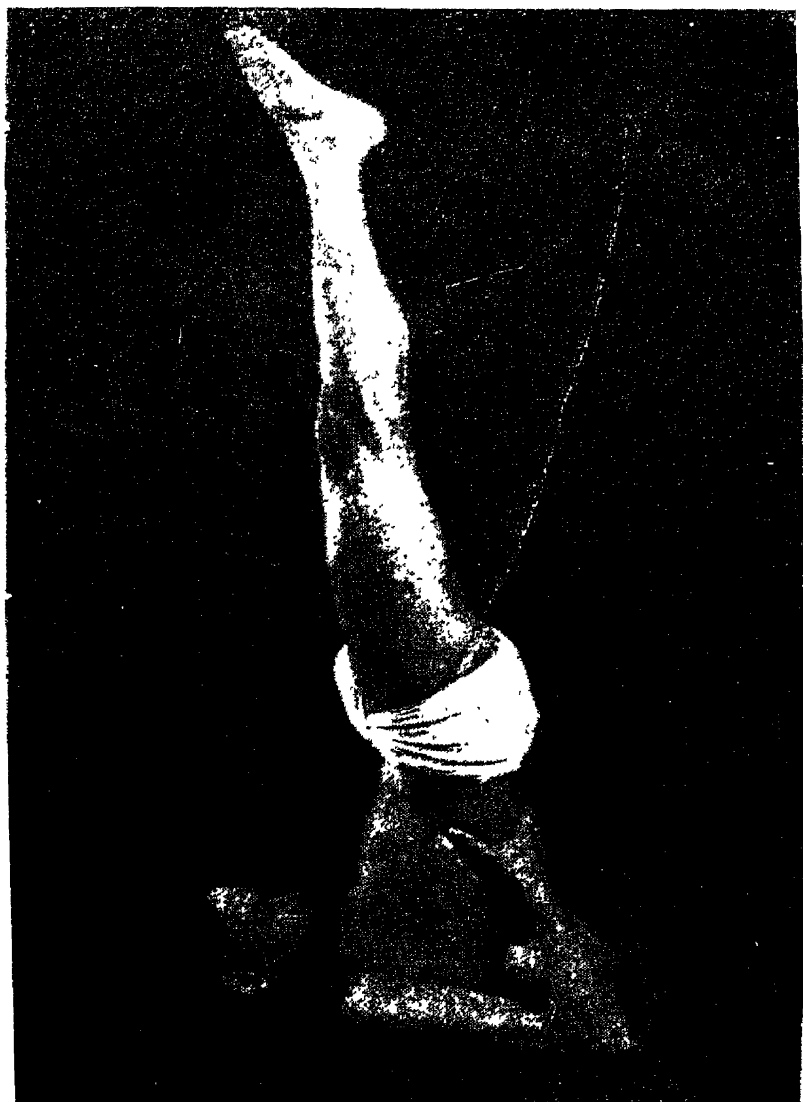
1. Lay the palm of your right hand over your right groin. Now whilst exerting firm pressure, bring it upwards as far as the lower ribs on your right side; then continue the stroke across the naval to the left lower ribs, and then down into your left groin. That is one complete circular stroke. You are now in a position to begin a second, similar stroking movement. Repeat 20 to 30 times. The stroking should not be a mere glide over the skin. Sufficient pressure should be used to influence the organs deep under the skin, *i.e.*, the abdominal muscles and the large intestines.

2. With your two fists knead up and down the central part of your abdomen. Press each fist well in, alternately, not together. Steady, not sudden, pressure should be applied. This movement is not unlike the kneading of dough.

3. Clench your right fist, not too tightly. Pointing the bent fingers inwards you, place them in the right groin. Now with a sort of continuous "cork-screw" movement work your bent fingers deeply into the right groin and move your hand slowly upwards as far as the lower right ribs; then across the naval to the left side, then down into the left groin. This movement [like (1) above] follows the course of the ascending, transverse and descending colon. Reference to the anatomical diagram will soon familiarise you with the course indicated.

4. Over the pit of the stomach (just immediately above the naval) give 20 to 30 gentle pats with your flat hands, alternately.

Finish with a few more circular strokings as in (1).



SARVANGA ASANA





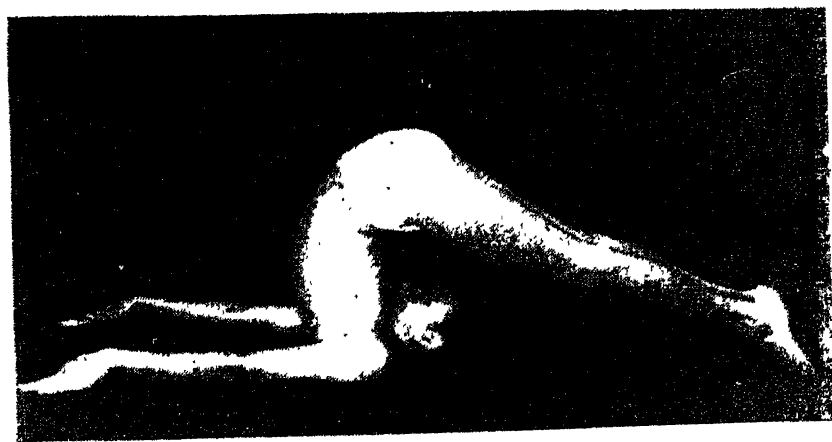


HALASANA-Final Stage



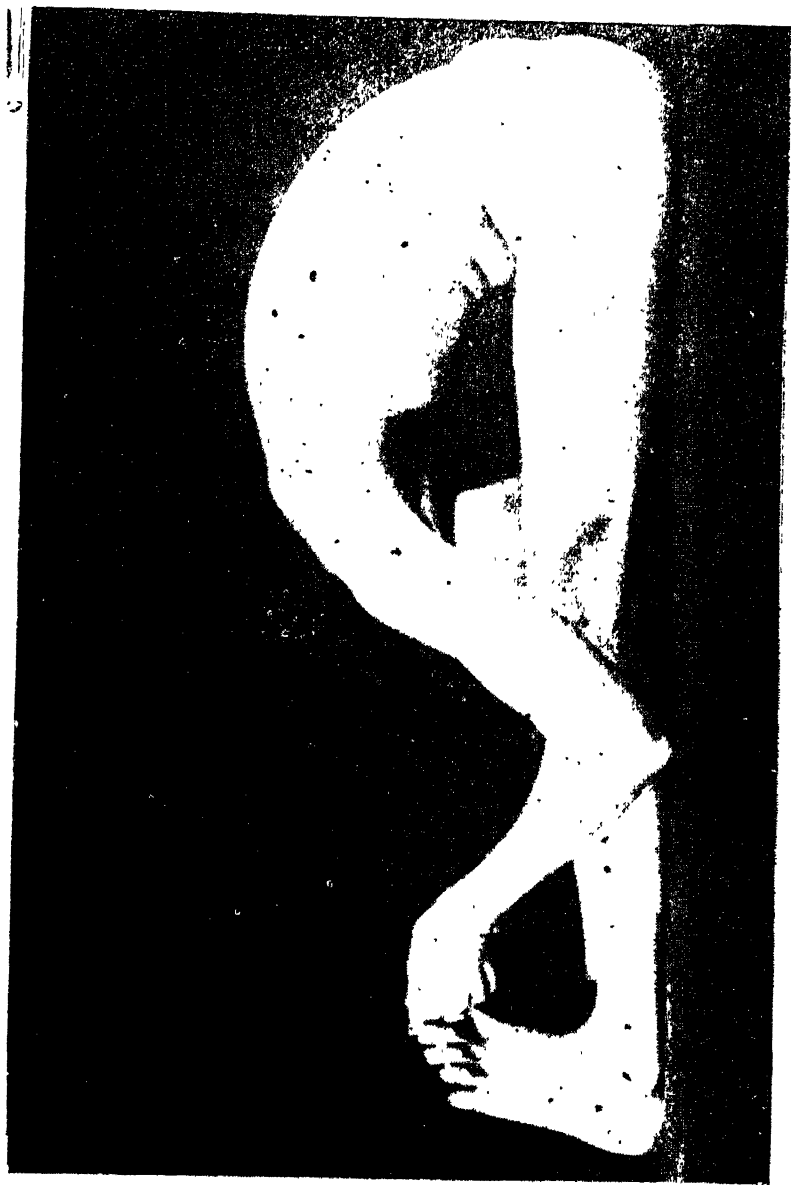


HALASANA - Stage 1



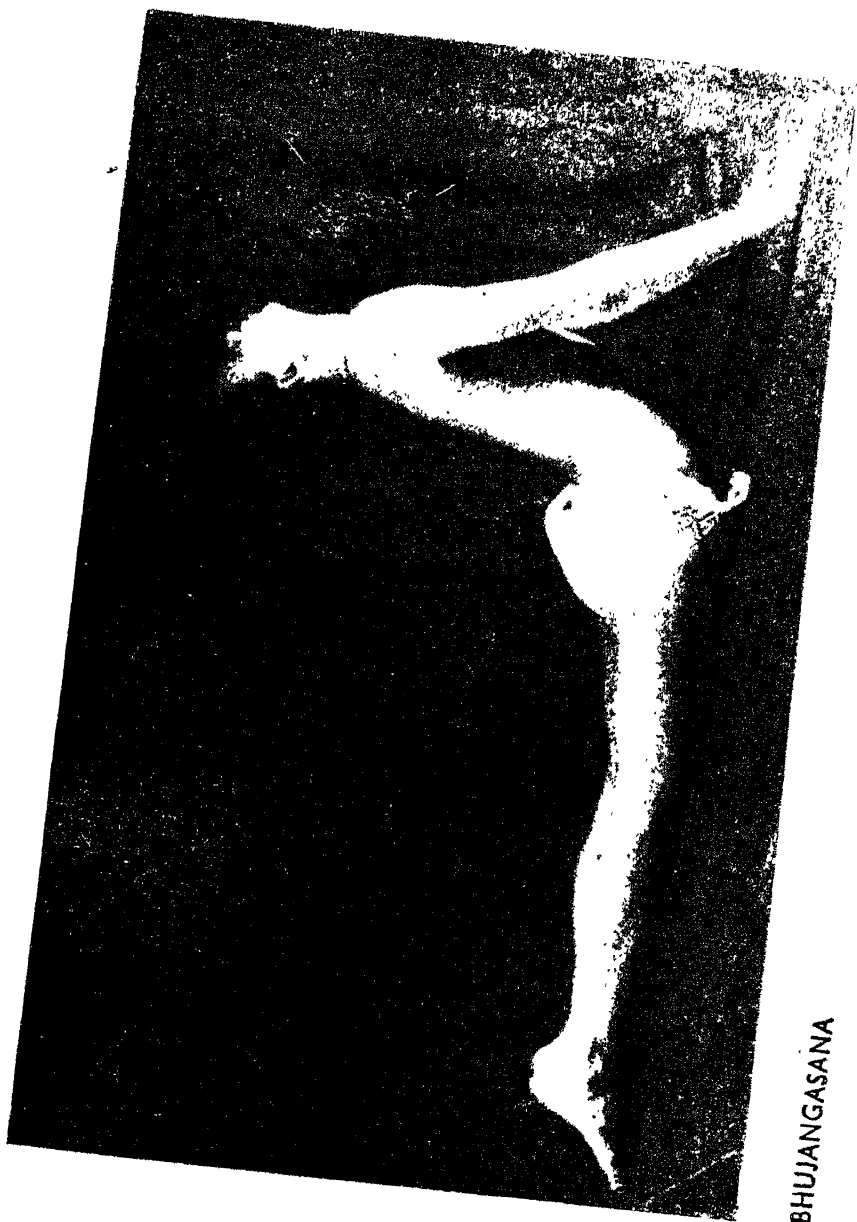
HALASANA - Stage 2





PASCHIMOTTANASANA





BHUJANGASANA





# SALABHASANA









## EXERCISE AS AID

Some yogic asanas are illustrated below, which will be an invaluable aid in restoring the tone of the abdominal muscles and thus improving digestion and will also to some extent relieve constipation. It should not be supposed that these exercises or any other systems of exercise will, by themselves, have great value except in the case of young people and in the very initial stages of indigestion. But even in such cases there is a snare. INDIGESTION OR ANY OTHER KIND OF BODILY OR MENTAL INDISPOSITION IS THE EFFECT OF SOME MISTAKES. ANY KIND OF REMEDY WHICH DOES NOT INVOLVE A CORRECTION OF THESE MISTAKES IS NO REMEDY AT ALL. ANY RELIEF OBTAINED BY SUCH MEASURES WILL ONLY BE TEMPORARY; INDEED, THE FACT THAT SOME TEMPORARY RELIEF IS OBTAINED, MAKES THE POSITION WORSE, BECAUSE THE SUFFERER WILL FAIL TO TAKE NOTE OF HIS MISTAKES AND WILL NOT CORRECT HIMSELF.

In so far as lack of exercise itself may be one of the contributory causes of indigestion, exercise should form part of Nature-Cure.

Yogasanas are of value to a sufferer from digestive disorders only as part of a comprehensive Nature-Cure treatment, which in essence is only making amends for past sins and reforming one's ways of life.

### SARVANGA ASANA

Lie flat on the ground, legs stretched without bending at the knees, feet also stretched, and arms on the ground with the palms facing the ground.

Now raise the legs slowly and steadily, without any jerky movement, the palms firmly pressing against the ground; the legs should be kept fully stretched and the head should not be raised from the ground. Then raise the hip, and then the spine slowly. (It is very important that there should be no jerky movements in doing either this asana or any of the succeeding ones.) Support the back with the hands as shown in the picture, and bring the trunk and legs to a vertical position. Remain steady in this position for a few minutes, or as long as you can without much strain, and come back to the starting point steadily and slowly, passing through in the reverse order through all the stages described above. Relax yourself completely\* and get ready for the next pose.

### HALASANA

This is the plough pose. The initial stages are the same as for the Sarvanga Asana, but instead of keeping the legs vertical you take them backward beyond the head and touch the ground with the toes. The arms may be either kept stretched or interlocked round the head. All movements should be slow and steady; no jerks. The return to the starting position should also be slow and steady. Relax fully at the end as before.

### PASCHIMOTTANASANA

Lie flat on the back with arms stretched out behind the head, and legs straight. Rise slowly, the head and arms being raised together simultaneously; the legs should not be raised, nor should the knees be bent. Bend forward, slowly, catch the toes with the hands, dip the head in between the arms and try to touch the knees with the nose.

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\*The relaxation pose is called Savasana. Here all the muscles are fully relaxed.

Stay for a minute and come back to the starting position slowly and relax.

*In this asana or in any of the succeeding or preceding asanas, it may not be possible for the novice to attain the final pose even with considerable strain. Don't use force, nor seek the help of an assistant to apply pressure and make you bend. Proceed as far as you can with bearable strain. But be slow and steady. What does you good is the effort to attain the final pose and not the final pose itself.*

### BHUJANGASANA

Lie flat on your face, legs and feet stretched and arms bent and kept by the side of the trunk, with palms on the ground as shown in the picture. Raise the head and bend the spine backward till the arms are fully stretched. Here the trunk should be raised mainly with the strength of the spine, not of the arms. Raise the chin till the neck is fully stretched. Come back to the starting position slowly and relax.

### SALABHASANA

Lie flat on your face, arms lying along the trunk with palms pressed against the ground and legs fully stretched. Now pressing the palms firmly against the ground, raise the legs slowly as high as possible, without bending the knees. Keep them up for as many seconds as possible and slowly bring them down. Relax.

### DHANURASANA

Lie flat on your face, knees bent, and catch hold of the feet with the hands. Raise the head and legs also by pulling up the feet with the hands. In the final pose the whole body is bent like a bow, the belly alone resting on the ground. Come back to rest slowly, and relax.



## THE NEED FOR WORK

The yogic poses described above are a great aid in restoring the tone of the digestive organs and strengthening the abdominal muscles which support the digestive organs. They may also help in correcting deformations and displacements. Any number of rhythmic exercises can be devised on the basis of these yogic poses to suit patients in different conditions.

Apart from these yogic asanas, a certain amount of physical work may also be necessary. Work is the physiological justification for eating, as the author of Practical Nature-Cure puts it, though it is true that an excess of physical exertion will be a tax on one's vitality. Before eating, one should create the need for food by work. That is perhaps the meaning of the biblical saying : *By the sweat of thy brow thou shalt eat.* When such a need for food is not created, keen hunger fails to make its appearance and digestion weakens.

But for creating this need for food, specialised systems of exercise are not needed. Indeed it will be far better to engage in some kind of fruitful activity. Productive work always brings a sense of satisfaction. Gardening, for instance, is an ideal work. Besides having the satisfaction of producing something good, one has the unique experience of living amidst things which live, grow and are colourful, which will impart a little at least of their liveliness and colour to one's own life.

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